

QUARTERLY STATEMENT

AS OF JUNE 30, 2017

OF THE CONDITION AND AFFAIRS OF THE

McLAREN HEALTH PLAN, INC

NAIC Group Code	4700	, 4700		NAIC Company Code	95562	Employer's ID Number	38-3252216
	(Current Period)	(Prior Period)				
Organized under the Laws	of	Michigan	,	State of Domi	cile or Port of Entry		MI
Country of Domicile		United States of Americ	а				
Licensed as business type:	Life, Accident & F Dental Service Co Other[]	• •		ualty[] e Corporation[] rally Qualified? Yes[] N	Health N	l, Medical & Dental Service or Ind Maintenance Organization[X]	demnity[]
Incorporated/Organized		09/12/1997		Comme	enced Business	08/01/199	98
Statutory Home Office		G-3245 Beeche	er Rd.	,		FLINT, MI, US 48532	
Main Administrative Office		(Street and Num	iber)		eecher Rd.	(City or Town, State, Country and Zip	Code)
	F	LINT, MI, US 48532		(Otroot ar	ia rambor)	(810)733-9723	
Mail Address	(City or Town,	State, Country and Zip Code	•			(Area Code) (Telephone Nun	nber)
Mail Address		G-3245 Beeche (Street and Number or		, ,		FLINT, MI, US 48532 (City or Town, State, Country and Zip	Code)
Primary Location of Books	and Records	(G-3	3245 Beecher Rd.	(,,,,,	
	FUN	IT. MI. US 48532		(S	treet and Number)	(010)722 0722	
		State, Country and Zip Code	e)		-	(810)733-9723 (Area Code) (Telephone Nun	nber)
Internet Web Site Address		www.mclarenhe	•			, , , ,	,
Statutory Statement Contac	ct	CHERYL I	DIEHL			(810)733-9723	
,		(Name	e)			(Area Code)(Telephone Number)(I	Extension)
		diehl@mclaren.org E-Mail Address)				(810)733-9652 (Fax Number)	
		PATRIC DAVE CAROL KATHL		Assistant Treas	Officer		
	chigan enesee ss						
herein described assets wer related exhibits, schedules a reporting entity as of the rep Statement Instructions and a reporting not related to acco described officers also inclu- enclosed statement. The ele	re the absolute proper and explanations there are explanations there are explanations there are explanations there are explanations are explanations are extremed as the related corresponding may be extremed filing may be	ty of the said reporting of the contained, annexed above, and of its income and Procedures manual procedures, according to ponding electronic filing	entity, free and or referred to, is and deductions I except to the e to the best of the y with the NAIC, gulators in lieu of	clear from any liens or class a full and true statemens therefrom for the period extent that: (1) state law neir information, knowledge when required, that is arof or in addition to the end (Signature) E MAZURKIEWICZ (Printed Name)	aims thereon, except of all the assets a ended, and have the nay differ; or, (2) the and belief, respect exact copy (except	r, and that on the reporting perion of as herein stated, and that this not liabilities and of the condition seen completed in accordance wat state rules or regulations requisitively. Furthermore, the scope of the for formatting differences due to the complete of the conditions of t	statement, together with and affairs of the said ith the NAIC Annual ire differences in of this attestation by the to electronic filing) of the
(1.			2.		3.	
	President (Title)			Treasurer (Title)		Assistant Treasu (Title)	rer
Subscribed and swor	n to before me this	, 2017	2	, ,		Yes[X] No[]	

(Notary Public Signature)

ASSETS

	AS	SEIS			
			urrent Statement Da		4
		1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets
1.	Bonds				
2.	Stocks:				
	2.1 Preferred stocks				
	2.2 Common stocks	40,712,561		40,712,561	39,159,322
3.	Mortgage loans on real estate:				
	3.1 First liens				
	3.2 Other than first liens				
4.	Real estate:				
	4.1 Properties occupied by the company (less \$0	0.000.000		0.000.000	0.700.007
	encumbrances)	2,629,363		2,629,363	2,769,627
	4.2 Properties held for the production of income (less \$0				
	encumbrances)				
5.	Cash (\$153,692,128), cash equivalents (\$0) and short-term				
J.	investments (\$15,625,415)			169 317 543	154 962 406
6.	Contract loans (including \$0 premium notes)				
7.	Derivatives				
8.	Other invested assets				
9.	Receivables for securities				
10.	Securities lending reinvested collateral assets				
11.	Aggregate write-ins for invested assets				
12.	Subtotals, cash and invested assets (Lines 1 to 11)				
13.	Title plants less \$0 charged off (for Title insurers only)				
14.	Investment income due and accrued	64,916		64,916	25,994
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of				
	collection		25,537	43,514	365,170
	15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$0 earned but unbilled premiums)				
	15.3 Accrued retrospective premiums (\$0) and contracts subject to redetermination (\$0)				
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers	1,020,363		1,020,363	1,487,102
	16.2 Funds held by or deposited with reinsured companies				
	16.3 Other amounts receivable under reinsurance contracts				
17.	Amounts receivable relating to uninsured plans				
18.1	Current federal and foreign income tax recoverable and interest thereon				
18.2	Net deferred tax asset				
19.	Guaranty funds receivable or on deposit				
20.	Electronic data processing equipment and software	2,768,444	2,466,161	302,282	399,169
21.	Furniture and equipment, including health care delivery assets	400.047	400.047		
20	(\$0)				
22.	Net adjustments in assets and liabilities due to foreign exchange rates Receivables from parent, subsidiaries and affiliates				
23. 24.	Health care (\$2,128,553) and other amounts receivable				
2 4 . 25.	Aggregate write-ins for other-than-invested assets			2,137,790	
26.	TOTAL assets excluding Separate Accounts, Segregated Accounts and				
20.	Protected Cell Accounts (Lines 12 to 25)	232 106 029	13 829 248	218 276 782	207 535 101
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
28.	TOTAL (Lines 26 and 27)				
DETA	ILS OF WRITE-INS				
	INVENTORY		·		
	DEFERRED CHARGES EQUIP FEES				
	Summary of remaining write-ins for Line 11 from overflow page				
1199.	TOTALS (Lines 1101 through 1103 plus 1198) (Line 11 above)				
2501. 2502. 2503.					
	Summary of remaining write-ins for Line 25 from overflow page				
	TOTALS (Lines 2501 through 2503 plus 2598) (Line 25 above)				

LIABILITIES, CAPITAL AND SURPLUS

	LIABILITIES, CAPITAL AND	JOIN L			
		1	Current Period	3	Prior Year 4
		Covered	Uncovered	Total	Total
1.	Claims unpaid (less \$0 reinsurance ceded)				
	Accrued medical incentive pool and bonus amounts				
2.	Unpaid claims adjustment expenses	1			
3.		1,111,130		1,771,750	1,77 1,730
4.	Aggregate health policy reserves, including the liability of \$0 for medical loss ratio	4 000 740		4 000 740	4 005 004
_	rebate per the Public Health Service Act	1			
5.	Aggregate life policy reserves				
6.	Property/casualty unearned premium reserve				
7.	Aggregate health claim reserves				
8.	Premiums received in advance	5,871,086		5,871,086	947,717
9.	General expenses due or accrued	7,133,503		7,133,503	8,633,049
10.1	Current federal and foreign income tax payable and interest thereon (including \$0				
	on realized gains (losses))				
10.2	Net deferred tax liability				
11.	Ceded reinsurance premiums payable				
12.	Amounts withheld or retained for the account of others	302,882		302,882	301,269
13.	Remittances and items not allocated	· · · · · · · · · · · · · · · · · · ·		·	
14.	Borrowed money (including \$0 current) and interest thereon \$0				
	(including \$0 current)				
15.	Amounts due to parent, subsidiaries and affiliates				
16.	Derivatives				
	Payable for securities				
17.					
18.	Payable for securities lending				
19.	Funds held under reinsurance treaties with (\$0 authorized reinsurers, \$0				
	unauthorized reinsurers and \$0 certified reinsurers)				
20.	Reinsurance in unauthorized and certified (\$0) companies				
21.	Net adjustments in assets and liabilities due to foreign exchange rates				
22.	Liability for amounts held under uninsured plans				
23.	Aggregate write-ins for other liabilities (including \$0 current)	112,235		112,235	112,235
24.	Total liabilities (Lines 1 to 23)	123,869,803		123,869,803	124,497,626
25.	Aggregate write-ins for special surplus funds	X X X	X X X		
26.	Common capital stock	X X X	X X X		
27.	Preferred capital stock	X X X	X X X		
28.	Gross paid in and contributed surplus	X X X	X X X	1,140,000	1,140,000
29.	Surplus notes	X X X	X X X		
30.	Aggregate write-ins for other-than-special surplus funds	X X X	X X X		
31.	Unassigned funds (surplus)		X X X	93.266.979	81.897.475
32.	Less treasury stock, at cost:				,,,,,
•=-	32.1	xxx	XXX		
	32.2				
33.	Total capital and surplus (Lines 25 to 31 minus Line 32)				
34.	Total Liabilities, capital and surplus (Lines 24 and 33)				
	II S OF WRITE-INS		^ ^ ^	210,210,102	201,555, 101
	RISK ADJUSTMENT PAYABLE	112,235		112,235	112,235
2302.					
2303.				I I	
2398.	Summary of remaining write-ins for Line 23 from overflow page	440.005		440.005	440.005
2399. 2501.	TOTALS (Lines 2301 through 2303 plus 2398) (Line 23 above)				112,235
2502.					
2503.		X X X	X X X		
	Summary of remaining write-ins for Line 25 from overflow page	X X X			
	TOTALS (Lines 2501 through 2503 plus 2598) (Line 25 above)		X X X		
3001.					
3002. 3003.					
	Summary of remaining write-ins for Line 30 from overflow page				
	TOTALS (Lines 3001 through 3003 plus 3098) (Line 30 above)				

STATEMENT OF REVENUE AND EXPENSES

	STATEMENT OF REVENUE		ear To Date	Prior Year To Date 3	Prior Year Ended December 31
		Uncovered	Total	Total	Total
1.	Member Months	xxx	1,153,118	1,218,122	2,366,346
2.	Net premium income (including \$0 non-health premium income)	xxx	431,436,074	469,599,712	 931,744,075
3.	Change in unearned premium reserves and reserves for rate credits				
4.	Fee-for-service (net of \$ 0 medical expenses)				
5.	Risk revenue				
6.	Aggregate write-ins for other health care related revenues	xxx	(1,295,520)	(1,075,865)	 (2,167,354)
7.	Aggregate write-ins for other non-health revenues		, ,	, , ,	, , ,
8.	Total revenues (Lines 2 to 7)				
	al and Medical:				
9.	Hospital/medical benefits		312.085.290	324.647.534	647.974.054
10.	Other professional services				
11.	Outside referrals				
12.	Emergency room and out-of-area				
13.	Prescription drugs				
14.	Aggregate write-ins for other hospital and medical				
15.	Incentive pool, withhold adjustments and bonus amounts				
16.	Subtotal (Lines 9 to 15)				
Less:	Cubicial (Ellios 3 to 10)		401,041,020	410,000,104	022,000,700
17.	Net reinauronea reconstina		754.450	1 705 711	2 004 476
	Net reinsurance recoveries Total hospital and medical (Lines 16 minus 17)				
18. 19.	· · · · · · · · · · · · · · · · · · ·				
	Non-health claims (net)				
20.	Claims adjustment expenses, including \$737,923 cost containment expenses				
21.	General administrative expenses		15,893,849	41,819,100	02,804,710
22.	Increase in reserves for life and accident and health contracts (including \$0 increase			(542.004)	(002 540)
22	in reserves for life only) Total underwriting deductions (Lines 18 through 22)				
24.	Net underwriting gain or (loss) (Lines 8 minus 23) Net investment income earned				
25.	Net realized capital gains (losses) less capital gains tax of \$0				
26.					
27.	Net investment gains or (losses) (Lines 25 plus 26)		7,891	(129,336)	(122,035)
28.	Net gain or (loss) from agents' or premium balances charged off [(amount recovered				
00	\$0) (amount charged off \$0)]				
29.	Aggregate write-ins for other income or expenses				
30.	Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24	, , , , , , , , , , , , , , , , , , ,	0.400.444	0.005.004	00 400 570
	plus 27 plus 28 plus 29)				
31.	Federal and foreign income taxes incurred				
32.	Net income (loss) (Lines 30 minus 31)	XXX	9,183,411	9,025,801	20,489,570
0601.	MPCA				
0602. 0603.	OTHER HEALTH CARE RELATED REVENUE				
0698.	Summary of remaining write-ins for Line 6 from overflow page				
	TOTALS (Lines 0601 through 0603 plus 0698) (Line 6 above)	X X X	(1,295,520)	(1,075,865)	(2,167,354)
0701. 0702.					
0703.		X X X			
0798.	Summary of remaining write-ins for Line 7 from overflow page				
	TOTALS (Lines 0701 through 0703 plus 0798) (Line 7 above)				
1401. 1402.					
1401. 1402. 1403.					
1401. 1402. 1403. 1498. 1499.	Summary of remaining write-ins for Line 14 from overflow page TOTALS (Lines 1401 through 1403 plus 1498) (Line 14 above)				
1402. 1403. 1498. 1499. 2901.	Summary of remaining write-ins for Line 14 from overflow page TOTALS (Lines 1401 through 1403 plus 1498) (Line 14 above) LOSS ON SALE OF EQUIPMENT				
1401. 1402. 1403. 1498. 1499.	Summary of remaining write-ins for Line 14 from overflow page TOTALS (Lines 1401 through 1403 plus 1498) (Line 14 above)				

STATEMENT OF REVENUE AND EXPENSES (Continued)

		1	2	3 Prior Year
		Current Year To Date	Prior Year To Date	Ended December 31
	CAPITAL & SURPLUS ACCOUNT			
33.	Capital and surplus prior reporting year	83,037,475	70,846,525	70,846,525
34.	Net income or (loss) from Line 32	9,183,411	9,025,801	20,489,570
35.	Change in valuation basis of aggregate policy and claim reserves			
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$0	1,374,704	(1,454,946)	(3,683,245)
37.	Change in net unrealized foreign exchange capital gain or (loss)			
38.	Change in net deferred income tax			
39.	Change in nonadmitted assets	811,388	(993,544)	(4,615,375)
40.	Change in unauthorized and certified reinsurance			
41.	Change in treasury stock			
42.	Change in surplus notes			
43.	Cumulative effect of changes in accounting principles			
44.	Capital Changes:			
	44.1 Paid in			
	44.2 Transferred from surplus (Stock Dividend)			
	44.3 Transferred to surplus			
45.	Surplus adjustments:			
	45.1 Paid in			
	45.2 Transferred to capital (Stock Dividend)			
	45.3 Transferred from capital			
46.	Dividends to stockholders			
47.	Aggregate write-ins for gains or (losses) in surplus			
48.	Net change in capital and surplus (Lines 34 to 47)	11,369,504	6,577,311	12,190,950
49. DETAI	Capital and surplus end of reporting period (Line 33 plus 48)	94,406,979	77,423,835	83,037,475
4701. 4702.				
4703. 4798.	Summary of remaining write-ins for Line 47 from overflow page			
4799.	TOTALS (Lines 4701 through 4703 plus 4798) (Line 47 above)			

CASH FLOW

		CASH FLOW			
			1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
		Cash from Operations	10 Date	To Date	December 31
1.	Premiums colle	ected net of reinsurance	435.807.044	464.441.162	924.451.970
2.		income			
3.		income	,	` '	, ,
J. 4.		1 to 3)			
4 . 5.	•	s related payments			
5. 6.					
		o Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7. 0		expenses paid and aggregate write-ins for deductions			
8.	·	to policyholders			
9.		reign income taxes paid (recovered) net of \$0 tax on capital gains			
	, ,				
10.	•	5 through 9)			
11.	Net cash from	operations (Line 4 minus Line 10)	11,969,574	(34,614,154)	(14,819,981
		Cash from Investments			
12.	Proceeds from	investments sold, matured or repaid:			
	12.1 Bonds				
	12.2 Stocks	.	7,582	2,589	5,20
	12.3 Mortga	age loans			
	12.4 Real e	state			
	12.5 Other i	invested assets			
	12.6 Net ga	ins or (losses) on cash, cash equivalents and short-term investments			(3,411,523
	12.7 Miscell	laneous proceeds	140,264	128,616	:
	12.8 TOTAL	investment proceeds (Lines 12.1 to 12.7)	147,846	131,205	(3,406,319
13.	Cost of investm	nents acquired (long-term only):			
	13.1 Bonds	. , -			
	13.2 Stocks	;	181.450	15.135.287	15.303.644
		age loans			
	ŭ	state			
		invested assets			
		laneous applications			
		L investments acquired (Lines 13.1 to 13.6)			
14. 		or decrease) in contract loans and premium notes			
15.	Net cash from i	investments (Line 12.8 minus Line 13.7 and Line 14)	(998,283)	(16,278,244)	(19,370,016
		Cash from Financing and Miscellaneous Sources			
16.	Cash provided				
	16.1 Surplu	s notes, capital notes			
	·	I and paid in surplus, less treasury stock			
	16.3 Borrow	ved funds			
	16.4 Net de	posits on deposit-type contracts and other insurance liabilities			
	16.5 Divide	nds to stockholders			
	16.6 Other	cash provided (applied)	3,383,846	496,171	(1,221,226
17.	Net cash from t	financing and miscellaneous sources (Line 16.1 through 16.4 minus Line 16.5			
	plus Line 16.6)		3,383,846	496,171	(1,221,226
	RECONCILIATIO	ON OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18.		cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and			
	· ·		14,355,137	(50,396,227)	(35,411,223
19.	,	uivalents and short-term investments:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(==,===,===,	(==,+++,===
	-	ning of year	154 962 406	190 373 620	190 373 620
	_	period (Line 18 plus Line 19.1)			
	10.2 LIIU UI	Note: Supplemental Disclosures of Cash Flow Information for			107,002,40
20.00	01				
	1		1		

20.0001		

		1	Comprehensive (H	lospital & Medical)	4	5	6	7	8	9	10
			2	3				Federal			
					Medicare	Vision	Dental	Employees Health	Title XVIII	Title XIX	
		Total	Individual	Group	Supplement	Only	Only	Benefit Plan	Medicare	Medicaid	Other
Total N	Members at end of:										
1.	Prior Year	186,387							416	185,971	
2.	First Quarter	190,521							599	189,922	
3.	Second Quarter	196,600							618	195,982	
4.	Third Quarter										
5.	Current Year										
6.	Current Year Member Months	1,153,118							3,619	1,149,499	
Total N	Member Ambulatory Encounters for Period:										
7.	Physician	754,427							2,368	752,059	
8.	Non-Physician	158,090							496	157,594	
9.	Total	912,517							2,864	909,653	
10.	Hospital Patient Days Incurred	401,890							762	401,128	
11.	Number of Inpatient Admissions	40,974							130	40,844	
12.	Health Premiums Written (a)	431,436,074	4,832	139,667					3,485,125	427,806,450	
13.	Life Premiums Direct										
14.	Property/Casualty Premiums Written										
15.	Health Premiums Earned	431,436,074	4,832	139,667					3,485,125	427,806,450	
16.	Property/Casualty Premiums Earned										
17.	Amount Paid for Provision of Health Care Services	403,521,568	(113,348)	649,319					3,797,589	399,188,008	
18.	Amount Incurred for Provision of Health Care										
, , =	Servicesr health premiums written; amount of Medicare Title								3,454,510	398,785,883	

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$......3,485,125.

1	2	alysis of Unpaid Cia	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 days	Over 120 Days	Total
Claims unpaid (Reported)	. co zaye	0: 00 2 a j c	o. co zaje	00,0	0.020 20,0	. 0.0
University of Michigan	2 645 585			21,070	119,237	2,785,892
Sparrow Hospital	1,000,245		177.171	117.280		1.515.177
Spectrum Health Hospitals Blodgett	729 398					729.398
Hurley Medical Center						578.183
William Beaumont Hospital Royal Oak	343 652					343,652
McLaren Flint Hospital	172.251					201,249
DMC Childrens Hospital of Michigan						150.304
Bronson Methodist Hospital - Kalama				22.214		146.401
Covenant Medical Center - Hospital	134,229				, -	134.229
Sinai Grace Hospital						115.109
Henry Ford Hospital - Detroit						111.853
Fresenius Med Care Lansing Central	107 000				.,	107.000
RCG Lansing	61 499					61,499
RCG East Lansing	59.348					59.348
DMC Huron Valley - Sinai Hospital						36,342
University of Michigan - Rehab Unit						35,506
Liberty Dialysis At Lakeland	34 760					34.760
Providence Hospital and Medical Center						- , -
St Joseph Mercy Oakland	25 702					
Shands Jacksonville						,
Bronson Battle Creek						25,360
St John Macomb Oakland Hosp - Warren						24,170
Munson Medical Center						23,346
MCLAREN REGIONAL MED	23 000				,	23,000
Superior Amb of Michigan						20,250
West Branch Regional Medical Ctr						
RCG Charlotte						
Fresenius Medical Care Sandusky						
FMC - Gull Road						,
McLaren Greater Lansing Hospital						
Fresenius Medical Care Caro	16.043					- ,
Soleo Health						- , -
Lakeland Regional Medical Center St						13,43
McLaren Port Huron						
McLaren Macomb Hospital						- , -
Ot Maryo of Michigan Caginayy	10,730					,
St Marys of Michigan - Saginaw	12,921					12,92
McLaren Northern Michigan Hospital						,
Josip Petani MD						11,86
St John Hospital and Medical Center	11,032					11,632
Select Specialty Hospital - Saginaw	11,4/1					11,47
Doctors Hospital of Michigan	11,113					11,113
Borgess Medical Center	10,855					- ,
Bay Area Reg Dial Center - Essexvil	10,095					10,695
Huron Medical Center	10,104					10,104
Hurley Medical Center Rehabilitation	10,089					10,089
0199999 Individually Listed Claims Unpaid	6,835 <u>,</u> 618 .		177,171	160,564	440,719	7,614,072
0299999 Aggregate Accounts Not Individually Listed - Uncovered						
0399999 Aggregate Accounts Not Individually Listed - Covered	45,005,830					64,417,95
0499999 Subtotals	51,841,448	3,869,736	3,756,624	1,098,586	11,465,629	72,032,023

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims									
1	2	3	4	5	6	7			
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 days	Over 120 Days	Total			
0599999 Unreported claims and other claim reserves									
0699999 Total Amounts Withheld	0699999 Total Amounts Withheld								
0799999 Total Claims Unpaid									
0000000 Approved Medical Incentive Deal And Denvis Amounts						2 206 076			

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID-PRIOR YEAR-NET OF REINSURANCE

					-	5	6
				Liab	oility		
		Cla	ims	End	d of		
		Paid Yea	Paid Year to Date		Quarter		
		1	2	3	4		Estimated Claim
							Reserve and
		On	On	On	On		Claim
	Line	Claims Incurred	Claims Incurred	Claims Unpaid	Claims Incurred	Claims Incurred	Liability
	of	Prior to January 1	During the	Dec 31 of	During the	in Prior Years	Dec 31 of
	Business	of Current Year	Year	Prior Year	Year	(Columns 1+3)	Prior Year
1.	Comprehensive (hospital & medical)					· ·	1,095,695
2.	Medicare Supplement						
3.	Dental only						
4.	Vision only						
5.	Federal Employees Health Benefits Plan						
6.	Title XVIII - Medicare						
7.	Title XIX - Medicaid						
8.	Other health						
9.	Health subtotal (Lines 1 to 8)						100,411,121
10.	Healthcare receivables (a)						
11.	Other non-health						
12.	Medical incentive pools and bonus amounts						
13.	Totals (Lines 9 - 10 + 11 + 12)	76,185,238	326,732,957	21,979,663	79,383,345	98,164,902	103,093,824

⁽a) Excludes \$.....0 loans or advances to providers not yet expensed.

1. <u>Summary of Significant Accounting Policies</u>

The accompanying statutory financial statements of McLaren Health Plan, Inc. (the "Company") have been prepared in conformity with accounting practices prescribed or permitted by the Michigan Department of Insurance and Financial Services ("DIFS").

DIFS recognizes only statutory accounting practices prescribed or permitted by the state of Michigan for determining and reporting the financial condition and results of operations of an insurance company, which include accounting practices and procedures adopted by the National Association of Insurance Commissioners ("NAIC") Accounting Practices and Procedures Manual ("NAIC SAP").

A reconciliation of the Company's net income and capital and surplus between NAIC SAP and practices prescribed and permitted by DIFS for the periods ending June 30, 2017 and December 31, 2016 is as follows:

	Description	SSAP	F/S Page	F/S Line #	State of Domicile	2017	2016
Net Income							
1	State Basis	XXX	XXX	XXX	MI	9,183,411	20,489,570
2	State Prescribed Practices that increase/(decrease) NAIC SAP					-	-
3	State Permitted Practices that increase/(decrease) NAIC SAP					-	-
4	NAIC SAP	XXX	XXX	XXX	MI	9,183,411	20,489,570
Surplus							
5	State Basis	XXX	XXX	XXX	MI	94,406,979	83,037,475
6	State Prescribed Practices that increase/(decrease) NAIC SAP					-	-
7	State Permitted Practices that increase/(decrease) NAIC SAP					-	-
8	NAIC SAP	XXX	XXX	XXX	MI	94,406,979	83,037,475

2. <u>Accounting Changes and Corrections of Errors</u>

No Significant Change

3. <u>Business Combinations and Goodwill</u>

No Significant Change

4. <u>Discontinued Operations</u>

No Significant Change

5. <u>Investments</u>

A. Mortgage Loans, including Mezzanine Real Estate Loans: N/A

B. Debt Restructuring: N/AC. Reverse Mortgages: N/AD. Loan-Backed Securities: N/A

E. Repurchase Agreements and/or Securities Lending Transactions: N/A

F. Real Estate: N/A

G. For Investments in Low-Income Housing Tax Credits (LIHTC): N/A

H. Restricted Assets:

	Restricted Asset Category	Total Gross Restricted from Current Year	Total Gross Restricted from Prior Year	Increase/(Decrea se) (1 minue 2)	Total Current Year Nonadmitted Restricted	Total Current Year Admitted Restricted	Percent Gross Restricted to Total Assets	Percentage Admitted Restricted to Total Admitted Assets
	Subject to contractual obligation for			,				
a.	which liability is not shown							
	Collateral held under security lending							
b.	agreements							
c.	Subject to repurchase agreements							
	Subject to reverse repurchase							
d.	agreements							
	Subject to dollar repurchase							
e.	agreements							
	Subject to dollar reverse repurchase							
f.	agreements							
g.	Placed under option contracts							
	Letter stock or securities restricted as to							
h.	sale							
i.	On deposit with states	1,223,482	1,220,392	3,090	-	1,223,482	0.527	0.561
	On deposit with other regulators hadies							
J.	On deposit with other regulatory bodies							
l.	Pledged as collateral not captured in other categories							
k.								
I.	Other restricted assets							
m.	Total Restricted Assets	1,223,482	1,220,392	3,090	-	1,223,482	0.527	0.561

I. Working Capital Finance Investments: N/A

J. Offsetting and Netting of Assets and Liabilities: N/A

K. Structured Notes: N/A

- 6. <u>Joint Ventures, Partnerships and Limited Liability Companies</u>
 No Significant Change
- 7. <u>Investment Income</u>
 No Significant Change
- 8. <u>Derivative Investments</u>
 No Significant Change
- 9. <u>Income Taxes</u>
 No Significant Change
- 10. <u>Information Concerning Parent, Subsidiaries and Affiliates</u>
 - A. No Significant Change
 - B. No Significant Change
 - C. No Significant Change
 - D. Due from Affiliates: \$1,746,832 amounts due from affiliate for administrative services and information system operations support. The amounts are settled monthly.

Due to Affiliates: \$6,305,613 amounts due to affiliate per contract for various administrative support, including personnel and information system operations support. The amounts are settled monthly.

- E. Guarantees or undertakings: No Change
- F. Management Agreements between:
 - (1) McLaren Health Plan and McLaren Health Care Corporation (MHCC): There are 3 agreements between McLaren Health Plan and McLaren Health Care Corporation:

The Management agreement states McLaren Health Care Corporation agrees to provide certain operational services and other resources to McLaren Health Plan. Amount for January-June 2017 = \$3,515,311

The Service Agreement states MHCC agrees to provide a Leased Employee to perform certain operational, personnel services, and other resources to MHP.

The Management Agreement states McLaren Health Plan agrees to provide certain operational services and other resources to McLaren Health Care Corporation.

Amount for January- June 2017 = \$515,000

(2) McLaren Health Plan and McLaren Regional Medical Center (MRMC):

MRMC agrees to provide certain accounting / resource services to McLaren Health Plan. Amount for January- June 2017 = \$5,981

(3) McLaren Health Plan and Health Advantage (HA):

McLaren Health Plan agrees to provide certain operational, personnel services and other resources to HA. Amount for January – June 2017 = \$5,277,524

(4) McLaren Health Plan and McLaren Medical Group:

McLaren Medical Group agrees to provide the services of the Physician to serve as the Chief Medical Officer for McLaren Health Plan.

- G. No Significant Change
- H. No Significant Change
- I. No Significant Change
- J. No Significant Change
- K. No Significant Change
- L. No Significant Change
- M. No Significant Change
- N. No Significant Change

11. Debt

No Significant Change

12. Retirement Plans, Deferred Compensation, Post employment Benefits and

Compensated Absences and Other Postretirement Benefit Plans

No Significant Change

13. <u>Capital and Surplus, Shareholders Dividend Restrictions and Quasi-Reorganizations</u>

No Significant Change

14. <u>Contingencies</u>

No Significant Change

15. <u>Leases</u>

No Significant Change

16. <u>Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk</u>

No Significant Change

17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

No Significant Change

18. <u>Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans</u>

- A. ASO plans N/A
- B. ASC plans N/A
- C. Medicare or similarly structured cost based reimbursed contracts
 - 1
 - a. No Significant Change.
 - b. No Significant Change.
 - c. No Significant Change
 - d. No Significant Change.

19. <u>Direct Premium Written/Produced by Managing General Agents/Third Party</u>

<u>Administrators</u>

No Significant Change

20. <u>Fair Value Measurement</u>

- A. Fair Value Measurements: N/A
- B. Other Fair Value Information: N/A
- C. Fair Value of Financial Instruments: N/A
- D. Not Practicable to Estimate Fair Value: N/A

21. Other Items:

- A. No Significant Change
- B. No Significant Change

C. Short-term investments in the amount of \$1,223,482 as of 06/30/2017 are on deposit with the State of Michigan Treasury in a safekeeping account as required by regulation.

22. <u>Events Subsequent</u> No Significant Change

23. <u>Reinsurance</u> No Significant Change

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

1. Did the reporting entity write accident and health insurance premium that is subject to the Affordable Care Act risk-sharing provisions – Yes

2	
_	•

		AMOL	<u>JNT</u>
Permanent ACA Risk Adjustment Progra	am		
Assets			
Premium adjustments recei	vable due to ACA Risk Adjustment	\$	-
Liabilities			
Risk adjustment user fees p	ayable for ACA Risk Adjustment	\$	-
Premium adjustments paya	ble due to ACA Risk Adjustment	\$	-
Operations (Revenue & Expense)			
Reported as revenue in prer	mium for accident and health		
contracts (written/collected) due to ACA Risk Adjustment	\$	-
Reported in expenses as AC	A risk adjustment user fees		
(incurred/paid)		\$	-
Fransitional ACA Reinsurance Program			
Assets			
Amounts recoverable for cla	nims paid due to ACA Reinsurance	\$	(6,144.62
Amounts recoverable for cla	nims unpaid due to ACA		
Reinsurance (Contra Liabilit	y)	\$	-
Amounts receivable relating	g to uninsured plans for		
contributions for ACA Reins	urance	\$	-
Liabilities			
Liabilities for contribution p	ayable due to ACA Reinsurance -		
not reported as ceded prem	ium	\$	-
Ceded reinsurance premiun	ns payable due to ACA Reinsurance	\$	-
Liabilities for amounts held	under uninsured plans		
contributions for ACA Reins	urance	\$	-
Operations (Revenue & Expense)			
Ceded reinsurance premiun	ns due to ACA Reinsurance	\$	-
Reinsurance recoveries (inc	ome statement) due to ACA		
Reinsurance payments or ex	spected payments	\$	(6,144.62)
ACA Reinsurance contribution	ons - not reported as ceded		
premium		\$	-
Temporary ACA Risk Corridors Program			
Assets			
Accrued retrospective prem	ium due to ACA Risk Corridors	\$	(2,962.21)
Liabilities			
Reserve for rate credits or p	olicy experience rating refunds due		
to ACA Risk Corridors		\$	-
Operations (Revenue & Expense)			
Effect of ACA Risk Corridors	on net premium income		
(paid/received)		\$	
Effect of ACA Risk Corridors	on change in reserves for rate		
credits		\$	_

3.

ROLL-FORWARD OF PRIOR YEAR ACA RISK-SHARING PROVISIONS

	Business Written	the Prior Year on Before December Prior Year	Year on Business December 31 of t	Written Before	Differe	nces	A	djustments		Unsettled Balan Reporting	
					Prior Year Accrued Less Payments (Col 1 - 3)	Prior Year Accrued Less Payments (Col 2-4)	To Prior Year Balances	To Prior Year Balances		Cumulative Balance from Prior Years (Col 1 - 3 +7)	Cumulative Balance from Prior Years (Col 2 - 4 + 8)
	1	2	3	4	5	6	7	8		9	10
	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Ref	Receivable	(Payable)
Permanent ACA Risk Adjustment Program											
Premium adjustments receivable			\$ 14,164		\$ (14,164)	S -			A	\$ (14,164)	\$ -
Premium adjustments (payable)					S -	S -			В	\$ -	\$ -
Subtotal ACA Permanent Risk Adjustment Program	s -	\$ -	s -	s -	s -	s -	s -	s -		s -	\$ -
Transitional ACA Reinsurance Program											
Amounts recoverable for claims paid			\$ 145,921		\$ (145,921)	s -			С	\$ (145,921)	\$ -
Amounts recoverable for claims											
unpaid (contra liability)					S -	S -			D	\$ -	\$ -
Amounts receivable relating to uninsured plans					s -	s -			Е	s -	s -
Liabilities for contributions payable											
due to ACA Reinsurance - not											
reported as ceded premium		\$ -		\$ -	S -	S -			F	\$ -	\$ -
Ceded reinsurance premiums payable					s -	s -			G	s -	s -
Liability for amounts held under											
uninsured plans					S -	S -			H	\$ -	\$ -
Subtotal ACA Transitional Reinsurance Program	s -	\$ -	\$ 145,921	s -	\$ (145,921)	s -	s -	s -		\$ (145,921)	\$ -
Temporary ACA Risk Corridors Program											
Accrued retrospective premium	\$ 5,526,573		\$ 2,962		\$ 5,523,611	S -			I	\$ 5,523,611	\$ -
Reserve for rate credit or policy experience rating refunds					s -	s -	s -	s -	J	s -	s -
Subtotal ACA Risk Corridors Program	\$ 5,526,573	\$ -	\$ 2,962	S -	\$ 5,523,611	S -	s -	S -		\$ 5,523,611	\$ -
Total for ACA Risk Sharing Provisions	\$ 5,526,573	s -	\$ 148,883	S -	\$ 5,377,690	S -	s -	S -		\$ 5,377,690	\$ -

4.

Risk Corridors Program Year	on Business W	on Business Written Before the Collecember 31 of the Prior Year Bus Before		Received or Paid as of the Current Year on Business Written Before December 31 of the Prior Year		Differences Prior Year Prior Year		Adjustments			Unsettled Balances as of the Reporting Date Cumulative Cumulative	
		_				Accrued Less Payments (Col 1 - 3) Accrued Less Payments (Col 2-4)		To Prior Year Balances	Year Year		Balance from Prior Years (Col 1 - 3 +7)	Balance from Prior Years (Col 2 - 4 + 8)
	1	2	3	4		5	6	7	8		9	10
	Receivable	(Payable)	Receivable	(Payable)	Re	ceivable	(Payable)	Receivable	(Payable)	Ref	Receivable	(Payable)
a. 2015												
1. Accrued retrospective premium	\$ 5,526,573		\$ 2,962.21		\$	5,529,535	\$ -				\$ 5,529,535	
Reserve for rate credits or policy experience rating refunds					\$	-	\$ -					
b. 2016												
1. Accrued retrospective premium					\$	-	\$ -				\$ -	
Reserve for rate credits or policy experience rating refunds					\$	-	\$ -					
c. 2017												
1. Accrued retrospective premium					\$	-	\$ -				\$ -	
Reserve for rate credits or policy experience rating refunds					\$	-	\$ -					
d. Total for Risk Comidors	\$ 5,526,573	\$ -	\$ 2,962	\$ -	\$	5,529,535	\$ -	\$ -	\$ -	\$ -	\$ 5,529,535	\$ -

5.

Risk Corridors Program Year	to be l	nted Amount Filed or Final nt Filed with	Amoun Impairn	its for	Amou from C	nts received	(Gro	et Balance oss of Non- iissions)	Non Amo	-Admitted	Net Ad	mitted
2015	\$	5,526,573	\$	-	\$	2,962	\$	5,523,611	\$	5,526,573	\$	(2,962)
2016	\$	-	\$	-	\$	-	\$	-			\$	-
2017	\$	-	\$	-	\$	-	\$	-		-	\$	-
Total	\$	5,526,573	\$	-	\$	2,962	\$	5,523,611	\$	5,526,573	\$	(2,962)

- 25. <u>Change in Incurred Claims and Claim Adjustment Expenses</u>
 No Significant Change
- 26. <u>Intercompany Pooling Arrangements</u> No Significant Change
- 27. <u>Structured Settlements</u> No Significant Change
- 28. <u>Health Care Receivables</u> A.

				Actual	Actual	Actual	
		Estimated		rebates	rebates	rebates	
		pharmacy	Pharmacy	received	received	received	
*Section		rebates	rebates	<= 90	91 - 180	> 180	Total
ID	Quarter	reported	as billed	days	days	days	Received
01	06/30/17			-	-	-	-
01	03/31/17			-	-	-	-
01	12/31/16			460,319	-	-	460,319
01	09/30/16			31,774	164,064	-	195,838
01	06/30/16			-	(1,062)	440,709	439,647
01	03/31/16			-	(27)	398,030	398,003
01	12/31/15			-	333,419	498,562	831,981
01	09/30/15			-	7,767	481,753	489,520
01	06/30/15			-	-	516,868	516,868
01	03/31/15			-	-	486,841	486,841
01	12/31/14			-	-	658,427	658,427
01	09/30/14			-	-	892,830	892,830
01	06/30/14			-	-	259,178	259,178
01	03/31/14			-	-	206,522	206,522
01	12/31/13			-	-	329,673	329,673
01	09/30/13	-	-	-	-	312,368	312,368
01	06/30/13	-	-	-	-	300,062	300,062
01	03/31/13	-	-	-	-	225,570	225,570

- B. Risk Sharing Receivables No Change
- 29. <u>Participating Policies</u> No Significant Change
- 30. <u>Premium Deficiency Reserves</u> No Significant Change
- 31. <u>Anticipated Salvage and Subrogation</u>
 No Significant Change

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES GENERAL

			GEN	NEKAL				
	Domicile, as requi	entity experience any material trans red by the Model Act? ort been filed with the domiciliary s		Disclosure of M	aterial Transactio	ons with the Stat	e of	Yes[] No[X] Yes[] No[] N/A[X]
	Has any change b reporting entity? If yes, date of char	een made during the year of this singe:	tatement in the charter, by-lav	vs, articles of in	corporation, or de	eed of settlemen	t of the	Yes[] No[X]
3.2	an insurer? If yes, complete Have there been a	tity a member of an Insurance Hold Schedule Y, Parts 1 and 1A. any substantial changes in the orga 3.2 is yes, provide a brief description	inizational chart since the price	•	ore affiliated pers	sons, one or mor	e of which is	Yes[X] No[] Yes[] No[X]
	If yes, provide the	entity been a party to a merger or or name of entity, NAIC Company Co of the merger or consolidation.				r any entity that	has ceased	Yes[] No[X]
		1 Name of	Entity	NAIC C	2 ompany Code	State	3 of Domicile	
5.		ity is subject to a management agr ent, have there been any significan xplanation.					orney-in-fact,	Yes[] No[] N/A[X]
6.1 6.2	State the as of dat	ate the latest financial examination te that the latest financial examinat	ion report became available fi	rom either the s	tate of domicile o	r the reporting e	ntity. This	12/31/2015
6.3	State as of what d	e date of the examined balance she ate the latest financial examination	report became available to o	ther states or th	e public from eith	ner the state of c	lomicile or	12/31/2015
6.4	date). By what departme	y. This is the release date or comple int or departments? ment of Insurance and Financial Se		report and not i	ille date of the ex	ammation (bala	ice sneet	03/21/2017
	Have all financial s filed with Departme	tatement adjustments within the la	test financial examination rep			equent financial	statement	Yes[X] No[] N/A[] Yes[X] No[] N/A[]
		entity had any Certificates of Authovernmental entity during the report		(including corpo	orate registration,	if applicable) su	spended or	Yes[] No[X]
8.2 8.3	If response to 8.1 Is the company aff response to 8.3 regulatory services	subsidiary of a bank holding compa is yes, please identify the name of filiated with one or more banks, thr is yes, please provide below the na s agency [i.e. the Federal Reserve ation (FDIC) and the Securities Exc	the bank holding company. ifts or securities firms? ames and location (city and st Board (FRB), the Office of the	ate of the main e Comptroller of	office) of any affi the Currency (O	CC), the Federa	l Deposit	Yes[] No[X] Yes[] No[X]
		1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC	
		Allillate Name	Location (City, State)	Yes[] No[X]	Yes[] No[X]	Yes[] No[X]	Yes[] No[X]	-
9.1	similar functions) (a) Honest and e relationships; (b) Full, fair, accu (c) Compliance w	urate, timely and understandable di vith applicable governmental laws,	ode of ethics, which includes I handling of actual or appare sclosure in the periodic repor rules and regulations;	the following st nt conflicts of in ts required to be	andards? terest between p e filed by the repo	ersonal and prof	-	Yes[X] No[]
9.2 9.2 9.3	(e) Accountability If the response to Has the code of e If the response to Have any provisi	nternal reporting of violations to an of for adherence to the code. o 9.1 is No, please explain: ethics for senior managers been ar o 9.2 is Yes, provide information relons of the code of ethics been wait o 9.3 is Yes, provide the nature of a 9.3 is Yes, provide the nature of a	nended? lated to amendment(s). ved for any of the specified of		e code, and			Yes[] No[X] Yes[] No[X]
10. 10.	1 Does the reportir 2 If yes, indicate ar	ng entity report any amounts due fr ny amounts receivable from parent	om parent, subsidiaries or affi	NCIAL iliates on Page 2 nt:	2 of this statemer	nt?		Yes[X] No[] \$1,746,832
	use by another p 2 If yes, give full ar	stocks, bonds, or other assets of the erson? (Exclude securities under send complete information relating the tments include an amount (\$1,223, s.	e reporting entity loaned, place ecurities lending agreements ereto:	.)	-			Yes[X] No[] nent of Insurance &

\$.....0

12. Amount of real estate and mortgages held in other invested assets in Schedule BA:

13. Amount of real estate and mortgages held in short-term investments:

GENERAL INTERROGATORIES (Continued)

INVESTMENT

\$.....0

14.1 Does the 14.2 If yes, ple	reporting entity have a ease complete the follow	ny investments in parent wing:	, subsidiaries and affiliates?				Yes[X] No[]
					1 Prior Year-End Book/Adjusted Carrying Value	2 Current Quarter Book/Adjusted Carrying Value	
	14.21 14.22 14.23 14.24 14.25	Preferred Stock	ts leal Estate		16,747,144	17,663,384	
	14.26 14.27 14.28	Total Investment in Pa Lines 14.21 to 14.26) Total Investment in Pa	rent, Subsidiaries and Affiliates rent included in Lines 14.21 to	(Subtotal 14.26	16,747,144	17,663,384	
15.2 If yes, has	eporting entity entered s a comprehensive des ch a description with th	into any hedging transac scription of the hedging p	tions reported on Schedule DB rogram been made available to	?			Yes[] No[X] Yes[] No[] N/A[X]
16.1 Tota 16.2 Tota	Il fair value of reinveste Il book adjusted/carryin	d collateral assets report	ne amount of the following as of ed on Schedule DL, Parts 1 an lateral assets reported on Sche liability page	d 2			\$ 0 \$ 0 \$ 0
offices, va custodial a Outsourci	ults or safety deposit b agreement with a qualit ng of Critical Functions	oxes, were all stocks, bo fied bank or trust compar , Custodial or Safekeepii	, real estate, mortgage loans at nds and other securities, owner by in accordance with Section 1 ng Agreements of the NAIC Fin the NAIC Financial Condition E	d throughout , III - Genera ancial Condi	t the current year hel al Examination Consi tion Examiners Hand	d pursuant to a derations, F. lbook?	Yes[X] No[]
		1			2		
	JPMORG FIFTH TH	Name of Cus AN CHASE BANK, NA IIRD BANK	stodian(s)	1111 POLA 111 LYON	Custodian Add ARIS PARKWAY, CC ST SW, GRAND RA	DLUMBUS OH 43240	
17.2 For all ag location a	reements that do not c and a complete explana	omply with the requirementation:	ents of the NAIC Financial Cond	lition Examir	ners Handbook, prov	ide the name,	
	Nar	1 ne(s)		2 Location(s)			3 xplanation(s)
17.3 Have then 17.4 If yes, giv	re been any changes, i re full and complete info	ncluding name changes, ormation relating thereto:	in the custodian(s) identified in	17.1 during	the current quarter?		Yes[] No[X]
	1 Old Cus		2 New Custodian		3 Date of Change	4 Reason	
	Old Cus	Stoulan	New Custodian			Neason	
17.5 Investme to make i note as s	nt management - Ident nvestment decisions or uch. [" that have acc	ify all investment advisor n behalf of the reporting e ess to the investment ac	s, investment managers, broke entity. For assets that are mana counts"; " handle securities"]	r/dealers, ind ged internal	cluding individuals th ly by employees of th	at have the authority ne reporting entity,	
			1 Name of Firm or Individual			2 Affiliation	
	Care	ol Solomon, Chief Financ	sial Officer				
17.5098 17.6 For thos	For those firms/individ designated with a "U") For firms/individuals u total assets under mar	uals listed in the table fo manage more than 10% naffiliated with the report	r Question 17.5, do any firms/in of the reporting entity's assets ing entity (i.e. designated with a nore than 50% of the reporting with an affiliation code of "A" (a	dividuals un ? a "U") listed i entity's asse	affiliated with the rep n the table for Quest ts?	ion 17.5, does the	Yes[] No[X] Yes[] No[X]

GENERAL INTERROGATORIES (Continued)

1	2	3	4	5
Central		Legal		Investment
Registration		Entity		Management
Depository		Identifier	Registered	Agreement
Number	Name of Firm or Individual	(LEI)	With	(IMA) Filed

^{18.1} Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? 18.2 If no, list exceptions:

Yes[X] No[]

GENERAL INTERROGATORIES

PART 2 - HEALTH

- Operating Percentages:
 1.1 A&H loss percent
 1.2 A&H cost containment percent
 1.3 A&H expense percent excluding cost containment expenses
- 93.440% 0.170% 4.430%
 - Yes[] No[X]
 - \$ Yes[] No[X]

- 2.1 Do you act as a custodian for health savings accounts?
 2.2 If yes, please provide the amount of custodial funds held as of the reporting date.
 2.3 Do you act as an administrator for health savings accounts?
 2.4 If yes, please provide the balance of the funds administered as of the reporting date.

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

The ming function it and a market of the state of the sta													
1	2	3	4	5	6	7	8	9					
NAIC					Type of		Certified	Effective Date					
Company				Domiciliary	Reinsurance	Type of	Reinsurer Rating	of Certified					
Code Number		Date	Name of Reinsurer	Jurisdiction	Ceded	Reinsurer	(1 through 6)	Reinsurer Rating					
Accident and Health - Affilia	ites												
11835	04-1590940	01/01/2017	PARTNERRE AMER INS CO	DE	SSL/L/I	Authorized	1	08/03/2015					

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories

		Current	rear to	Date - All	ocated by	States and				
						Direct Busi	·			1
		1	2	3	4	5 Federal	6 Life and Annuity	7	8	9
	State, Etc.	Active Status	Accident and Health Premiums	Medicare Title XVIII	Medicaid Title XIX	Employees Health Benefits Program Premiums	Premiums and Other Considerations	Property/ Casualty Premiums	Total Columns 2 Through 7	Deposit-Type Contracts
1.	Alabama (AL)	N								
2.	Alaska (AK)	N								
3.	Arizona (AZ)	N								
4.	Arkansas (AR)	N								
5.	California (CA)									
6.	Colorado (CO)									
7.	Connecticut (CT)									
8.	Delaware (DE)									
9.	District of Columbia (DC)									
10.	Florida (FL)									
11.	Georgia (GA)									
12.	Hawaii (HI)									
13.	Idaho (ID)									
14.	Illinois (IL)									
15.	Indiana (IN)									
16.	lowa (IA)									
17.	Kansas (KS)	N								
18.	Kentucky (KY)	N								
19.	Louisiana (LA)									
20.	Maine (ME)									
21.	Maryland (MD)									
22.	Massachusetts (MA)									
23.	Michigan (MI)									
24.	Minnesota (MN)									
25.	Mississippi (MS)									
26.	Missouri (MO)									
27.	Montana (MT)									
28.	Nebraska (NE)									
29.	Nevada (NV)	IN								
30.	New Hampshire (NH)	IN								
31.	New Jersey (NJ)									
	New Mexico (NM)									
32.	New York (NY)									
33.										
34.	North Carolina (NC)									
35.	North Dakota (ND)									
36.	Ohio (OH)									
37.	Oklahoma (OK)									
38.	Oregon (OR)									
39.	Pennsylvania (PA)									
40.	Rhode Island (RI)									
41.	South Carolina (SC)									
42.	South Dakota (SD)									
43.	Tennessee (TN)									
44.	Texas (TX)									
45.	Utah (UT)									
46.	Vermont (VT)									
47.	Virginia (VA)									
48.	Washington (WA)									
49.	West Virginia (WV)									
50.	Wisconsin (WI)									
51.	Wyoming (WY)									
52.	American Samoa (AS)									
53.	Guam (GU)									
54.	Puerto Rico (PR)									
55.	U.S. Virgin Islands (VI)									
56.	Northern Mariana Islands (MP)	N								
57.	Canada (CAN)	N								
58.	Aggregate other alien (OT)									
59.	Subtotal		144,499						. 432,269,658	
60.	Reporting entity contributions for									
	Employee Benefit Plans	X X X .								
61.	Total (Direct Business)		144,499	3,496,877	. 428,628,283				. 432,269,658	
	LS OF WRITE-INS									
58001.		X X X .								
58002.		X X X .								
58003.							I			
	Summary of remaining write-ins for								[
55556.	Line 58 from overflow page	X X X .								
58999	TOTALS (Lines 58001 through	٨٨٨.								
00000	58003 plus 58998) (Line 58 above)	x x x .								
	(Lille 30 above)									

⁽a) Insert the number of L responses except for Canada and Other Alien.

McLaren Health Care Corporation



McLaren Health Care 38-2397643 (MI) 100%	McLaren Greater Lansing 38-1434090 (MI) 100%	McLaren Northern MI 38-2146751 (MI) 100%	McLaren Bay Region 38-1976271 (MI) 100%	McLaren Central MI 38-1420304 (MI) 100%	McLaren Macomb 38-1218516 (MI) 100%	McLaren Oakland 38-1428164 (MI) 100%	McLaren Flint 38-2383119 (MI) 100%	McLaren Lapeer 38-2689033 (MI) 100%	Karmanos Cancer Institute 38-1613280 (MI) 100%	McLaren Port Huron 38-1369611 (MI) 100%	McLaren Medical Group 38-2988086 (MI) 100%	McLaren Homecare Group 38-3491714 (MI) 100%	McLaren Health Plan 38-3252216 (MI) 100% Group Code: 4700 NAIC: 95562
McLaren HC Village 26-2693350 (MI) 100%	McLaren Lansing Foundation 38-2463637 (MI) 100%	McLaren Northern MI Foundation 38-2445611 (MI) 100%	McLaren Bay Special Care 38-3161753 (MI) 100%	Meridian Ventures 38-3226022 (MI) 100%	McLaren Macomb Foundation 38-2578873 (MI) 100%	McLaren Riley Foundation 20-0442217 (MI) 100%	McLaren Flint Foundation 38-1358053 (MI) 100%	McLaren Lapeer Foundation 38-2689603 (MI) 100%	Karmanos Cancer Center 20-1649466 (MI) 100%	McLaren Port Huron Foundation 38-2777750 (MI) 100%	Mid-MI Physicians 38-3267121 (MI) 100%	Hospice and Homecare Foundation 46-3643089 (MI) 100%	McLaren Health Advantage 91-214720 (MI) 100%
Great Lakes Cancer Institute 38-3584572 (MI) 100%		VitalCare, Inc. 38-2527255 (MI) 100%	McLaren Bay Medical Foundation 38-2156534 (MI) 100%			McLaren Physician Partners 38-3136458 (MI) 100%	McLaren Hospitality House 45-5567669 (MI) 100%		Michigan Cancer Society 38-2823451 (MI) 100%	Marwood Manor Nursing 38-2683251 (MI) 100%			McLaren Health Plan Community 27-2204037 (MI) 100% Group Code: 4700 NAIC: 14217
		NMI Medical Management 20-8458840 (MI) 100%				Hospital Health Care 38-2643070 (MI) 100%			Delphinus Investments Inc. 45-4758176 (MI) 100%	Parkview Property Management 38-2467310 (MI) 100%			
		NMI Hematology/Oncology 32-0020293 (MI) 100%								Willow Enterprises 38-2491659 (MI) 100%			
		Cardiac Institute 26-2774689 (MI) 100%											
		Charlevoix Nursing										McLaren Insurance	

Insurance Company LTD. (CYM) 100%

015

Home

38-3038683 (MI) 100%

Rapin & Rapin Prescription Services Pharmacy 38-3465261 (MI) 100%

SCHEDULE Y PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

	PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM													
1	2	3	4	5	6 7	8	9	10	11	12	13	14	15	16
					Name of				Directly	Type of Control				ĺ
					Securities	Names of		Relation-	Controlled	(Ownership,	If Control		ls an	
		NAIC			Exchange	Parent.	Domic-	ship to	by	Board.	is	Ultimate	SCA	
		-							1	,				
		Comp-			if Publicly	Subsidiaries	iliary	Report-	(Name of	Management,	Ownership	Controlling	Filing	
Group		any	ID	FEDERAL	,	or	Loca-	ing	Entity /	Attorney-in-Fact,	Provide	Entity(ies)	Required?	
Code	Group Name	Code	Number	RSSD	CIK or International)	Affiliates	tion	Entity	Person)	Influence, Other)	Percentage	/ Person(s)	(Y/N)	*
		00000	20 2207642			Mal area Health Care Care	MI .	UDP .					N	
		00000	38-2397643 . 26-2693350 .			McLaren HealthCare Corp	MI . MI .	NIA	McLaren HealthCare Corp	Ownership		McLaren Health Care	N	
		00000	20-2093330 .			. WCLaren HealthCare Village	IVII .	NIA	WicLater HealthCare Corp	Ownership	. 100.0	Corporation	N	
		00000	38-3584572			Great Lakes Cancer Institute	l MI.	NIA	McLaren HealthCare Corp	Ownership	100.0	McLaren Health Care	IN	
			00 0004072 .			ordat Editos Gariosi montato			Wozaron ricultioare corp	- Cwildidillp		Corporation	N	
		00000	38-1613280 .			Karmanos Cancer Institute	l MI.	NIA	McLaren HealthCare Corp	Ownership	100.0	McLaren Health Care Corp	N	
		00000	20-1649466			Karmanos Cancer Center	MI .	NIA	Karmanos Cancer Institute	Ownership	100.0	McLaren Health Care Corp .	N	
		00000	38-2823451			Michigan Cancer Society	MI .	NIA	Karmanos Cancer Institute	Ownership	100.0	McLaren Health Care Corp .	N	
		00000	45-4758176 .			Delphinus Investments Inc.	MI .	NIA	Karmanos Cancer Institute	Ownership	. 100.0	McLaren Health Care Corp .	N	
		00000	38-2156534			Bay Medical Foundation	MI .	NIA	Bay Regional Medical Center	Ownership	. 100.0	McLaren Health Care		
												Corporation	N	
		00000	38-1976271 .			Bay Regional Medical Center DBA					400 0	McLaren Health Care		
		00000	38-3161753 .			McLaren Bay Region	MI .	NIA	McLaren HealthCare CorpBay Regional Medical Center DBA McLaren	Ownership	100.0	Corporation	N	
		00000	38-3161753.			Bay Special Care Hospital	IVII .	NIA	Bay Regional Medical Center DBA McLaren	Oumarahin	100.0	Corporation	N	
		00000	38-1420304 .			. Central Michigan Community Hosital			Bay Region	Ownership	. 100.0	McLaren Health Care	N	
		00000	30-1420304 .			DBA McLaren Central Michigan	l MI.	NIA	McLaren HealthCare Corp	Ownership	100.0		N	
		00000	38-3226022 .			Meridian Ventures, Inc.	MI .	NIA	Central Michigan Community Hosital DBA	Ownership	. 100.0	McLaren Health Care	IN	
			00 0220022 .			Worldian Vontaroo, mo.			McLaren Central Michigan	Ownership	100.0	Corporation	N	
		00000	38-1434090 .	1		. Ingham Regional Medical Center DBA			mozaron contra mionigan	O William P		McLaren Health Care		
						McLaren Greater Lansing	MI .	NIA	McLaren HealthCare Corp	Ownership	100.0		N	
		00000	38-2463637 .			. McLaren Lansing Foundation	MI .	NIA	Ingham Regional Medical Center DBA			McLaren Health Care		
									McLaren Greater Lansing	Ownership	. 100.0	Corporation	N	
		00000	38-2146751 .			McLaren Northern Michigan	MI .	NIA	McLaren HealthCare Corp	Ownership	. 100.0	McLaren Health Care Corp .	N	
		00000	38-2445611 .			McLaren Norther MI Foundation	MI .	NIA	McLaren Northern Michigan	Ownership	. 100.0	McLaren Health Care Corp .	N	
		00000	38-2527255 .			VitalCare, Inc.	MI .	NIA	McLaren Northern Michigan	Ownership		McLaren Health Care Corp	N	
		00000	20-8458840 .			NMI Medical Management	MI .	NIA	McLaren Northern Michigan	Ownership	. 100.0	McLaren Health Care Corp . McLaren Health Care Corp .	N	
			32-0020293 . 26-2774689 .			NMI Hematology/Oncology	MI.	NIA	McLaren Northern Michigan McLaren Northern Michigan	Ownership		McLaren Health Care Corp .	N N	
		00000	38-3038683			Charlevoix Nursing Home	MI .	NIA	McLaren Northern Michigan	Ownership		McLaren Health Care Corp .	N	
			38-3465261			Rapin & Rapin Prescription Services	IVII .	NIA	WoLaron Northern Wildingan	Ownorship	100.0	MoLaren Health Gale Colp.		
			. 50 0400201.	1		Pharmacy	MI .	NIA	McLaren Northern Michigan	Ownership	100 0	McLaren Health Care Corp .	.l N	1
		00000	38-1218516 .			McLaren Macomb	MI .	NIA	McLaren HealthCare Corp	Ownership	100.0			
				1								Corporation	N	
		00000	38-2578873 .			. McLaren Macomb Foundation	MI .	NIA	McLaren Macomb	Ownership	100.0	McLaren Health Care		
												Corporation	N	
		00000	38-1428164 .			Pontiac Osteopathic Hospital DBA						McLaren Health Care		
						McLaren Oakland	MI .	NIA	McLaren HealthCare Corp	Ownership	100.0		N	
		00000	20-0442217 .			McLaren Riley Foundation	MI .	NIA	Pontiac Osteopathic Hospital DBA McLaren		400.0	McLaren Health Care		
		00000	20 20 420 70			Hannital Hanlib Cons		NII A	Oakland	Ownership	. 100.0	Corporation	N	
		00000	38-2643070 .			Hospital Health Care	MI .	NIA	Pontiac Osteopathic Hospital DBA McLaren	Ownership	100.0	McLaren Health Care	N	
		00000	38-3136458 .			. McLaren Physician Partners	l MI.	NIA	Oakland McLaren HealthCare Corp	Ownership	100.0		N	
		00000	30-3130438 .			inicalen Enysician Partners	IVII .	NIA	WICLAIGH HEARINGAIG COIP	Ownership	. 100.0	Corporation	N	
		იიიიი	38-2383119 .			. McLaren Regional Medical Center DBA						McLaren Health Care	IN	
			2000119	1		McLaren Flint	MI.	NIA	McLaren HealthCare Corp	Ownership	100 0	Corporation	N	
		00000	38-1358053 .			The McLaren Flint Foundation	MI .	NIA	McLaren Regional Medical Center DBA			McLaren Health Care		
'''									McLaren Flint	Ownership	. 100.0	Corporation	N	
		00000	45-5567669 .			McLaren Hospitality House	MI .	NIA	McLaren Regional Medical Center DBA	'		McLaren Health Care		ĺ
						, ,			McLaren Flint	Ownership	. 100.0	Corporation	N	
			I	1	1	1	1	1	1	I to the second of the second	1	1 .	1	1

SCHEDULE Y PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

4700 McLaren Health Plan 00000 91-2141720 Health Advantage Inc. MI DS McLaren Health Plan 0wnership 100.0 McLaren Health Care Corporation N McLaren Health Care N McLaren He										<u> </u>					
Replace	1	2	3	4	5	6 7	8	9	10	11	12	13	14	15	16
NAIC September						Name of				Directly	Type of Control				
Composition						Securities	Names of		Relation-	Controlled	(Ownership,	If Control		ls an	
Coup Coup Coup Coup Feberal February Febr			NAIC			Exchange	Parent,	Domic-	ship to	by	Board.	is	Ultimate	SCA	
Crough C			Comp-			if Publicly	Subsidiaries	iliary	Report-	,	Management.	Ownership	Controlling	Filina	
Code Group Name Code Number RSSD Cilk or International) Affiliates tion Entity Person) Influence, Other) Percentage / Person(s) (Y/N) *	Groui		anv	l ID	FEDERAL	,	or	Loca-	ina	Entity /	•	Provide	Entity(ies)	"	
Lapeer Regional Medical Center DBA McLaren Health Care McLar			. ,		1	,	Affiliates				•		• • • •		*
McLaren Lapeer Region Mil NIA McLaren HealthCare Corp Mulcaren Health Care C	0000	Croup Hamo			11000		7 1111101000	4011	Linuty	1 515511)	miliaorios, outory	roroomago	\ /	(1/11)	
McLaren Lapeer Foundation Mi NIA Lapeer Regional Medical Center DBA McLaren Health Care Mi Mi Mi Mi Mi Mi Mi M			. 00000	00 2003000 .			, ,	MI	NIA	Mol aren HealthCare Corn	Ownership	100.0		N	
McLaren Health Plan			00000	38-2689603							Ownership	100.0	McI aren Health Care	IN	
McLaren Port Huron McLaren HealthCare Corp McLaren Port Huron McLaren Health Care Corp N McLaren Health Care Corp M McLaren Health Care Corp M McLaren Health Care Corp M McLaren Health Care Corp M			. 00000				Mozaron zaposi i odnadasi			McLaren Lapeer Region	Ownership	100.0		l N	
McLaren Port Huron Modularen Health Care Corp N NIA McLaren Port Huron Ownership 100.0 McLaren Health Care Corp N NIA McLaren Port Huron Ownership 100.0 McLaren Health Care Corp N NIA McLaren Port Huron Ownership 100.0 McLaren Health Care Corp N NIA McLaren Port Huron Ownership 100.0 McLaren Health Care Corp N NIA McLaren Port Huron Ownership 100.0 McLaren Health Care Corp N NIA McLaren Port Huron Ownership 100.0 McLaren Health Care Corp N NIA McLaren Port Huron Ownership 100.0 McLaren Health Care Corp N NIA McLaren Port Huron Ownership 100.0 McLaren Health Care Corp N NIA McLaren Port Huron Ownership 100.0 McLaren Health Care Corp N NIA McLaren Health Care Corp N NIA McLaren Health Care Corp N NIA McLaren Health Care Corp Ownership 100.0 McLaren Health Care Corp N NIA McLaren Health Care Corp Ownership 100.0 McLaren Health Care Corp N NIA McLaren Health Care Corp Ownership 100.0 McLare			. 00000	38-1369611.			McLaren Port Huron	MI .		McLaren HealthCare Corp	Ownership	100.0	McLaren Health Care Corp	N	
Mode Note							. McLaren Port Huron Hospital Foundation			McLaren Port Huron	Ownership	100.0	McLaren Health Care Corp	N	
Milicare							Marwood Manor Nursing					100.0	McLaren Health Care Corp	N	
McLaren Medical Group MI NIA McLaren HealthCare Corp MI NIA McLaren HealthCare Corp MI NIA McLaren Health Care McLaren Health Plan							Parkview Property Management					100.0	McLaren Health Care Corp	N	
Mid-Michigan Physicians Mid-Michigan Phy										McLaren Port Huron		100.0	McLaren Health Care Corp	N	
Mid-Michigan Physicians			. 00000	38-2988086 .			McLaren Medical Group	IVII .	NIA	MCLaren HealthCare Corp	Ownersnip	100.0		NI NI	
Corporation N McLaren Health Care Mc			00000	38-3267121			Mid-Michigan Physicians	М	ΝΙΔ	McLaren Medical Group	Ownershin	100.0		IN	
Miliar M			. 00000	30-3207121.			Wild-Wildingari Frysicians	۱۷۱۱ .	181/3	Wocaron Wodicar Group	CWIICIGIIIP	100.0		N	
McLaren Health Plan 00000 46-3643089 McLaren Health Plan 00000 91-2141720 McLaren Health Plan 00000 0000 McLaren Health Plan 00000 0000 McLaren Health Plan 00000 0000 McLaren Health Plan 00000 McLaren Health Care Corp 00000 McLaren Health Plan 00000 McLaren Health Care Corp McLaren Health Plan 00000 McLaren Health Care Corporation N McLaren Health Plan 00000 McLaren Health Care Corporation N McLaren Health Care Corporati			. 00000	38-3491714 .		.	Visiting Nurse Services of Michigan DBA								
McLaren Health Plan 95562 38-3252216 McLaren Hea								MI .	NIA	McLaren HealthCare Corp	Ownership	100.0	Corporation	N	
4700 McLaren Health Plan 95562 38-3252216 McLaren Health Plan MI NIA McLaren Health Care Corp Ownership 100.0 McLaren Health Care Corp N 4700 McLaren Health Plan 00000 91-2141720 Health Advantage Inc. MI DS McLaren Health Plan Ownership 100.0 McLaren Health Care Corp McLaren Health Care Corp Corporation N 4700 McLaren Health Plan 00000 91-2141720 Health Advantage Inc. MI DS McLaren Health Plan Ownership 100.0 McLaren Health Care Corp Corporation N McLaren Health Plan 00000 91-2141720 McLaren Health Care Corp McLaren Health Plan McLaren Health Plan Ownership 100.0 McLaren Health Care Corp Corporation N McLaren Health Plan McLaren Health Plan McLaren Health Plan Ownership 100.0 McLaren Health Care Corp Corporation N			. 00000	46-3643089 .			. Hospice and Homecare Foundation	MI .	NIA	Visiting Nurse Services of Michigan DBA	•				
4700 McLaren Health Plan 14217 27-2204037 McLaren Health Plan 00000 91-2141720 McLaren Health Plan 00000 91-2141720 McLaren Health Plan 00000 McLare	,													N	
4700 McLaren Health Plan 00000 91-2141720 Health Advantage Inc. MI DS McLaren Health Plan Ownership 100.0 McLaren Health Care Corporation N N N N N N N N N N N N N N N N N N N			95562	38-3252216 .				MI .				100.0	McLaren Health Care Corp	N	
4700 McLaren Health Plan 00000 91-2141720 Health Advantage Inc. MI DS McLaren Health Plan 00000 Ownership 100.0 McLaren Health Care Corporation N Ownership 100.0 McLaren Health Care Corporation 100.0 McLaren Health Care	4700	. McLaren Health Plan	14217	27-2204037 .			McLaren Health Plan Community	MI .	DS	McLaren Health Plan	Ownership	100.0		l N	
	4700	Mol gron Hoolth Dian	00000	01 21/1720			Health Adventoge Inc	MI	De	Mal aran Haalth Dlan	Ownership	100.0		N	
00000 0000 McLaren Insurance Company LTD. CYM NIA McLaren HealthCare Corp Ownership 100.0 McLaren Health Care	4/00	. WicLaren Health Plan	00000	91-2141720.			nealth Advantage Inc.	IVII .	DO	Wicharen Health Plan	Ownership	100.0		N	
			00000				McLaren Insurance Company LTD	CYM	NIA	McLaren HealthCare Corp	Ownership	100.0		IN	
							modal and a company E15.	• • • • • • • • • • • • • • • • • • •			•		Corporation	N	

Asterisk	Explanation
0000001	

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

RESPONSE

No

1. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?

Explanations:

Bar Codes:



OVERFLOW PAGE FOR WRITE-INS

ASSETS

	С	urrent Statement Da	te	4
	1	2	3	
			Net Admitted	December 31
		Nonadmitted	Assets	Prior Year Net
	Assets	Assets	(Cols. 1 - 2)	Admitted Assets
1104. OTHER INVESTMENT DEFERRED COMPENSATION	118,020		118,020	88,521
1105. SELF INS TRUST FUND CTF	186,553		186,553	174,463
1106. RISK CORRIDOR RECEIVABLE	6,000,847	6,003,810	(2,962)	
1107. ACCOUNTS RECEIVABLE - RISK ADJUSTMENT				9,569
1108. PREPAID DENTAL EXPENSES	80,696	80,696		
1109. PREPAID RENT EXPENSES	37,474	37,474		
1197. Summary of remaining write-ins for Line 11 (Lines 1104 through 1196)	6,423,591	6,121,979	301,611	272,554
2597. Summary of remaining write-ins for Line 25 (Lines 2504 through 2596)				

STATEMENT AS OF June 30, 2017 OF THE MCLAREN HEALTH PLAN, INC SCHEDULE A - VERIFICATION

Real Estate

		1	2
			Prior Year Ended
		Year To Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year	2,769,627	2,377,993
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.1 Actual cost at time of acquisition2.2 Additional investment made after acquisition		660,052
3.	Current year change in encumbrances		
4.	Total gain (loss) on disposals		
5.	Deduct amounts received on disposals		
6.	Total foreign exchange change in book/adjusted carrying value		
7.	Deduct current year's other-than-temporary impairment recognized		
8.	Deduct current year's depreciation		
9.	Book/adjusted carrying value at the end of current period (Lines 1 + 2 + 3 + 4 - 5 + 6 - 7 - 8)		
10.	Deduct total nonadmitted amounts		
11.	Statement value at end of current period (Line 9 minus Line 10)	2,629,363	2,769,627

SCHEDULE B - VERIFICATION

Mortgage Loans

	mortgage Estilo		
		1	2
			Prior Year Ended
		Year To Date	December 31
1.	Book value/recorded investment excluding accrued interest, December 31 of prior year		
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Capitalized deferred interest and other		
4.	Accrual of discount		
5.	Unrealized valuation increase (decrease)		
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals Deduct amortization of premium and mortgage interest poin Total fassion auchange phance in back value/recorded interest.		
8.	Deduct amortization of premium and mortgage interest poin		
9.	Total foreign exchange change in book value/recorded inve		
10.	Deduct current year's other-than-temporary impairment recognized		
11.	Book value/recorded investment excluding accrued interest at end of current period (Lines 1 + 2 + 3 + 4 + 5		
	6 - 7 - 8 + 9 - 10)		
12.	Total valuation allowance		
13.	Subtotal (Line 11 plus Line 12)		
14.	Deduct total nonadmitted amounts		
15.	Statement value at end of current period (Line 13 minus Line 14)		

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

	Other Long Term invested 76566		
		1	2
			Prior Year Ended
		Year To Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year		
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
ĺ	Actual cost at time of acquisition Additional investment made after acquisition		
3.	Capitalized deferred interest and other		
4.	Accrual of discount		
5.	Unrealized valuation increase (decrease)		
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals		
8.	Deduct amortization of premium and depreciation		
9.	Total foreign exchange change in book/adjusted carrying value		
10.	Deduct current year's other-than-temporary impairment recognized		
11.	Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 + 6 - 7 - 8 + 9 - 10)		
12.	Deduct total nonadmitted amounts		
13.	Statement value at end of current period (Line 11 minus Line 12)		

SCHEDULE D - VERIFICATION

Bonds and Stocks

		1	2
			Prior Year Ended
		Year To Date	December 31
1.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year	39,159,322	27,544,124
2.	Cost of bonds and stocks acquired	181,450	15,303,644
3.	Accrual of discount		
4.	Unrealized valuation increase (decrease)	1,374,704	(3,683,245)
5.	Total gain (loss) on disposals	4,666	1
6.	Deduct consideration for bonds and stocks disposed of	7,582	5,202
7.	Deduct amortization of premium		
8.	Total foreign exchange change in book/adjusted carrying value		
9.	Deduct current year's other-than-temporary impairment recognized		
10.	Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 - 6 - 7 + 8 - 9)		
11.	Deduct total nonadmitted amounts		
12.	Statement value at end of current period (Line 10 minus Line 11)	40,712,561	39,159,322

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity

During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

	During the Cur	ient Quarter	ioi ali bolla	s and i refer	red Stock by	INAIO Desig	mation		
		1	2	3	4	5	6	7	8
		Book/Adjusted				Book/Adjusted	Book/Adjusted	Book/Adjusted	Book/Adjusted
		Carrying Value	Acquisitions	Dispositions	Non-Trading	Carrying Value	Carrying Value	Carrying Value	Carrying Value
		Beginning of	During Current	During Current	Activity During	End of	End of	End of	December 31
	NAIC Designation	Current Quarter	Quarter	Quarter	Current Quarter	First Quarter	Second Quarter	Third Quarter	Prior Year
BOND	S								
1.	NAIC 1 (a)	1,221,702			1,780	1,221,702	1,223,482		1,220,392
2.	NAIC 2 (a)								
3.	NAIC 3 (a)								
4.	NAIC 4 (a)								
5.	NAIC 5 (a)								
6.	NAIC 6 (a)								
7.	NAIC 6 (a)	1,221,702			1,780	1,221,702	1,223,482		1,220,392
PREF	RRED STOCK								
8.	NAIC 1								
9.	NAIC 2								
10.	NAIC 3								
11.	NAIC 4								
12.	NAIC 5								
13.	NAIC 6								
14.	Total Preferred Stock								
15.	Total Bonds & Preferred Stock				1,780	1,221,702	1,223,482		1,220,392

SCHEDULE DA - PART 1

Short - Term Investments

	1	2	3	4	5
	Book/Adjusted				Paid for Accrued
	Carrying		Actual	Interest Collected	Interest
	Value	Par Value	Cost	Year To Date	Year To Date
9199999. Totals	15,625,415	X X X	15,625,415		

SCHEDULE DA - Verification

Short-Term Investments

	0.10.1.1.00		
		1	2
			Prior Year Ended
		Year To Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year	15,587,578	184,377,164
2.	Cost of short-term investments acquired	37,837	
3.	Accrual of discount		
4.	Unrealized valuation increase (decrease)		
5.	Total gain (loss) on disposals		
6.	Deduct consideration received on disposals		
7.	Deduct amortization of premium		
8.	Total foreign exchange change in book/adjusted carrying value		
9.	Deduct current year's other-than-temporary impairment recognized		
10.	Book/adjusted carrying value at end of current period (Lines 1 + 2 +		
	3+4+5-6-7+8-9)	15,625,415	15,587,578
11.	Deduct total nonadmitted amounts		
12.	Statement value at end of current period (Line 10 minus Line 11)	15,625,415	15,587,578

SI04 Schedule DB - Part A Verification
SI04 Schedule DB - Part B Verification
SI05 Schedule DB Part C Section 1
SI06 Schedule DB Part C Section 2
SI07 Schedule DB - Verification
SI08 Schedule E - Verification (Cash Equivalents) NONE

E01 Schedule A Part 2 NONE
E01 Schedule A Part 3NONE
E02 Schedule B Part 2NONE
E02 Schedule B Part 3NONE
E03 Schedule BA Part 2 NONE
E03 Schedule BA Part 3

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

	Show An Long-Term Bonds and Stock Acquired During the Current Quarter												
1	2	3	4	5	6	7	8	9	10				
								Paid for	NAIC				
								Accrued	Designation				
CUSIP				Name of	Number of			Interest and	or Market				
Identification	Description	Foreign	Date Acquired	Vendor	Shares of Stock	Actual Cost	Par Value	Dividends	Indicator (a)				
8399998 Summ	nary Item from Part 5 for Bonds (N/A to Quarterly)				X X X	X X X	X X X	X X X	X X X				
8999998 Summ	nary Item from Part 5 for Preferred Stocks (N/A to Quarterly)	X X X	X X X	X X X	X X X	X X X							
Common Sto	cks - Industrial and Miscellaneous (Unaffiliated)												
921943809	VANGUARD DEVELOPED MARKETS INDEX FUND		06/20/2017	JPMORGAN	557.870	7,364	x x x		κ				
922042304	VANGUARD EMERGING MARKETS		06/20/2017	JPMORGAN	125.210		X X X		K				
922908702	VANGUARD SMALL CAP INDEX		06/20/2017	JPMORGAN	17.060				K				
922908843 922908108	VANGUARD MIDCAP INDEX		06/22/2017	JPMORGAN			X X X		K				
	tal - Common Stocks - Industrial and Miscellaneous (Unaffiliated)			I .		00.504	XXX		X X X				
-	· · · · · · · · · · · · · · · · · · ·			I		26,524	XXX						
Common Sto	cks - Mutual Funds												
4812C0167	JPMorgan Mutual Short Duration Bond Fund		04/26/2017	JPMorgan	2,031.500	22,001	X X X		Ļ				
4812C0167	JPMorgan Mutual Short Duration Bond Fund		05/26/2017	JPMorgan	1,810.360	19,624	X X X		L				
	JPMorgan Mutual Short Duration Bond Fund			JPMorgan					L				
	tal - Common Stocks - Mutual Funds				X X X	63,001	XXX		X X X				
					X X X	89,524	X X X		X X X				
9799998 Summ	nary Item from Part 5 for Common Stocks (N/A to Quarterly)	X X X	X X X	X X X	X X X	X X X							
	tal - Common Stocks	X X X	89,524			X X X							
9899999 Subto	tal - Preferred and Common Stocks	X X X	89,524			X X X							
9999999 Total	- Bonds, Preferred and Common Stocks		X X X	89,524	X X X		X X X						

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stocks Sold, Redeemed or Otherwise Disposed of During the Current Quarter

	During the ourient Quarter																				
1	2	3	4	5	6	7	8	9	10		Change in Bo	ok/Adjusted Ca	rrying Value		16	17	18	19	20	21	22
		F								11	12	13	14	15							
		0																			
		r							Prior Year			Current Year's		Total	Book/				Bond Interest/		
		е							Book/	Unrealized		Other Than	Total	Foreign	Adjusted	Foreign			Stock	Stated	NAIC
		i			Number				Adjusted	Valuation	Current Year's	Temporary	Change in	Exchange	Carrying Value	Exchange	Realized	Total	Dividends	Contractual	Designation
CUSIP		g	Disposal	Name of	of Shares		Par	Actual	Carrying	Increase/	(Amortization)/	Impairment	B./A.C.V.	Change in	at Disposal	Gain (Loss)	Gain (Loss)	Gain (Loss)	Received	Maturity	or Market
Identification	Description	n	Date	Purchaser	of Stock	Consideration	Value	Cost	Value	(Decrease)	Accretion	Recognized	(11 + 12 - 13)	B./A.C.V.	Date	on Disposal	on Disposal	on Disposal	During Year	Date	Indicator (a)
8399998 Summ	nary Item from Part 5 for Bonds (N/A to Qua	arterly)		·	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX.	XXX.
8999998 Summ	nary Item from Part 5 for Preferred Stocks (N/A to C	Quarterly)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX.	XXX.
9799998 Summ	nary Item from Part 5 for Common Stocks (I	N/A to C	Quarterly)		X X X	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX.	XXX.
9899999 Subtot	tal - Preferred and Common Stocks				XXX		XXX													XXX.	XXX.
9999999 Total -	Bonds, Preferred and Common Stocks				XXX		XXX													XXX.	XXX.

E06 Schedule DB Part A Section 1NONE
E07 Schedule DB Part B Section 1NONE
E08 Schedule DB Part D Section 1NONE
E09 Schedule DB Part D Section 2 - Collateral Pledged By Reporting Entity NONE
E09 Schedule DB Part D Section 2 - Collateral Pledged To Reporting Entity NONE
E10 Schedule DL - Part 1 - Securities Lending Collateral Assets NONE
E11 Schedule DL - Part 2 - Securities Lending Collateral Assets NONE

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

	1			Depository B	4 Amount	5 Amount of	Book Balance at End of Each Month During Current Quarter			
					of Interest Received During	Interest Accrued at Current	6	7	8	
	Depository		Code	Rate of Interest	Current Quarter	Statement Date	First Month	Second Month	Third Month	*
open depositories	Бороскогу		0000	Intoroot	Quartor	Date	World	Worter	WOTET	
	FLINT, MICHIGAN	06/30/2017					78,585,755	80,792,467	63,201,187	XXX
INDEPENDENT BANK	MICHIGAN	06/30/2017					240,824	240,657	240,485	XXX
-	MICHIGAN	06/30/2017					234,678	229,249	197,872	XXX
1ST SECURITY BANK OF WASHINGTON	MICHIGAN	06/30/2017							248,000	$ _{XXX}$
ABC BANK	MICHIGAN	06/30/2017			I .		225,946	227,428	247,288	XXX
	MICHIGAN	06/30/2017 06/30/2017					245,938	208,996		
	MICHIGAN	06/30/2017					233,677 238,564	233,395	246,979	XXX
ALMA BANK	MICHIGAN	06/30/2017					245,864	230,520	247,380	XXX
		06/30/2017					247,680	242,719 240,590	245,834 247,611	XXX
AMERICAN MOMENTUM	MICHIGAN	06/30/2017					209,484	240,390		^^^
BANK	MICHIGAN	06/30/2017					236,634	245,681		XXX
	MICHIGAN	06/30/2017 06/30/2017			I .		232,130	230,247	247,673	
		06/30/2017					248,000 247,738	246,000	248,000 244,875	
ANSTAFF BANK	MICHIGAN	06/30/2017						213,727	247,688	XXX
	MICHIGAN	06/30/2017 06/30/2017					1,460		2/17 007	XXX
	MICHIGAN	06/30/2017					239,809		'	XXX
ASSOCIATED BANK										
	MICHIGAN	06/30/2017					241,682	218,863	246,774	XXX
ATLANTIC CAPITAL BANK, NATIONAL ASSOCIATION	MICHIGAN	06/30/2017					240,736	247,904	18,400	XXX
ATLANTIC COAST BANK	MICHIGAN	06/30/2017			I .		240,461	243,456	247,860	XXX
	MICHIGAN	06/30/2017					247,757		60,330	
AVIDIA BANK BANC OF CALIFORNIA,	MICHIGAN	06/30/2017							14 	
NATIONAL ASSOCIATION	MICHIGAN	06/30/2017					248,000	248,000	247,911	XXX
	MICHIGAN	06/30/2017					239,671	243,801	247,996	XXX
	MICHIGAN	06/30/2017					246,918	242,230		$ _{XXX}$
BANK HAPOALIM B.M	MICHIGAN	06/30/2017			I .		232,281	238,670	247,640	XXX
	MICHIGAN	06/30/2017 06/30/2017			I .		247,974	215,647		
BANK OF CHINA - NEW	WIICHIGAN	00/30/2017					247,591	214,506	245,693	^^^
YORK BRANCH	MICHIGAN	06/30/2017			1		248,000	84,642		
	MICHIGAN	06/30/2017 06/30/2017					240,943	212,082 235,237	492,304 248,000	
BANK OF FAYETTE COUNTY		06/30/2017						229,037	247,362	
BANK OF HOPE	MICHIGAN	06/30/2017					241,996	247,914	10,471	XXX
		06/30/2017 06/30/2017					247,368 248,000	215,988	248,000	XXX
		06/30/2017			1		61,412	231,772	247,964	XXX
BANK OF ROMNEY	MICHIGAN	06/30/2017							247,512	XXX
BANK OF THE OZARKS BANK OF THE VALLEY		06/30/2017 06/30/2017					247,156	247,055	248,000 4,282	
BANK OF TIOGA		06/30/2017					247,732	211,456	246,512	
BANK VI	MICHIGAN	06/30/2017					239,982	223,077	247,823	XXX
BANKERS BANK OF KANSAS BANKUNITED NATIONAL	MICHIGAN	06/30/2017					241,445	246,140	248,000	XXX
	MICHIGAN	06/30/2017					248,000	248,000	247,999	XXX
BANKWELL BANK	MICHIGAN	06/30/2017					248,000	248,000	248,000	
BAR HARBOR BANK &	MICHIGAN	06/30/2017					248,000	248,000	248,000	V V V
		06/30/2017					486,169	240,000		
BENNINGTON STATE BANK	MICHIGAN	06/30/2017					13			XXX
BERKSHIRE BANK BLUE RIDGE BANK.	MICHIGAN	06/30/2017					248,000	248,000	247,860	XXX
NATIONAL ASSOCIATION	MICHIGAN	06/30/2017					247,418	217,430	246,035	XXX
BLUEHARBOR BANK	MICHIGAN	06/30/2017					247,998	233,931	247,987	XXX
	MICHIGAN	06/30/2017 06/30/2017			1		248,000 241,737	248,000 233,928	248,000 247,999	
BRANSON BANK		06/30/2017						233,928		
BRUNSWICK BANK AND								·		
	MICHIGAN	06/30/2017 06/30/2017					246,353	247,265		
BUSINESS BANK OF SAINT							229,362	227,584	247,960 	^^^
LOUIS	MICHIGAN	06/30/2017					234,946	224,041	245,851	
		06/30/2017 06/30/2017					188,485 247,507	243,833 236,811		
	MICHIGAN	06/30/2017					247,307	230,611	247,817	
CAMDEN NATIONAL BANK	MICHIGAN	06/30/2017					247,458	217,780		
CAMPBELL COUNTY BANK INC.	MICHIGAN	06/30/2017					244,644	222,727	246,110	XXX
CAPITAL BANK		06/30/2017						461,468		
CAPITAL BANK NATIONAL								,	,	
ASSOCIATION	MICHIGAN	06/30/2017					248,000	248,000	248,000	XXX
ASSOCIATION		06/30/2017					247,997	247,315		
CAPSTAR BANK	MICHIGAN	06/30/2017	1		I		248,000	233,122	247,629	XXX

	1		2	3	4 Amount	5 Amount of	Dur	ince at End of Ea ing Current Quar		9
					Amount	-		ing Current Quar	rter	
					,	-		ing carroin daa	1 (0)	
					of Interest	Interest	6	7	8	†
							O	'	0	
					Received	Accrued				
					During	at Current				
				Rate of	Current	Statement	First	Second	Third	
	,									*
	epository		Code	Interest	Quarter	Date	Month	Month	Month	
		06/30/2017			I I		245,993	220,602	247,777	
	IICHIGAN	06/30/2017					238,874	235,661	247,832	XXX
CARVER FEDERAL										
		06/30/2017							246,854	XXX
CARVER STATE BANK M	IICHIGAN	06/30/2017					17,469			XXX
CBANK M	IICHIGAN	06/30/2017					246,757	239,690	247,539	XXX
CEDAR RAPIDS BANK AND								,	•	
TRUST COMPANY M	IICHIGAN	06/30/2017					247,966	235,220	247,904	XXX
CEDARSTONE BANK M		06/30/2017							247,808	XXX
		06/30/2017					248,000		248,000	
		06/30/2017								
		06/30/2017								XXX
		06/30/2017							495,642	
		06/30/2017						234,685	240,533	
		06/30/2017							247,710	
		06/30/2017								
		06/30/2017							247,744	
CHATTAHOOCHEE BANK		00/00/2011								// // //
OF GEORGIA M	IICHIGAN	06/30/2017					247.846	211,171	29,451	XXX
		06/30/2017	1	1			241 528	221,413		XXX
		06/30/2017						236,224		
CINCINNATI FEDERAL		30,00, <u>2</u> 011						200,227	217,000	````
SAVINGS AND LOAN										
ASSOCIATI M	IICHIGAN	06/30/2017					۵7/			XXX
CIT BANK, NATIONAL		00/00/2017								^^^
	IICHIGAN	06/30/2017					2/17 211	234,990	2/7 075	y y y
		06/30/2017								
CITIZENS BANK AND TRUST	IICHIGAN	00/30/2017					·		•	
COMPANY M	IICHIGAN	06/30/2017					247 710	211,517	247 000	l _v _v _v
		06/30/2017								
	IICHIGAN	06/30/2017							1,355	^ ^ ^
CITIZENS BUILDING AND	IICHIGAN	00/00/0047					4 400	2,068	04.570	l _{vvv}
	IICHIGAN	06/30/2017					1,468		34,570	X X X
CITIZENS DEPOSIT BANK	HOLHOAN	00/00/0047					007 440	000 044	0.47.047	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
		06/30/2017								
1 -	IICHIGAN	06/30/2017					1,809			XXX
CITIZENS NATIONAL BANK										
		06/30/2017								
	IICHIGAN	06/30/2017					234,637	237,761	248,000	XXX
CITY FIRST BANK OF D.C.										
NATIONAL ASSOCIATION M		06/30/2017							113,120	
1 -	IICHIGAN	06/30/2017					207,716			XXX
CITY NATIONAL BANK OF										
	IICHIGAN	06/30/2017						231,458	246,793	XXX
CLARION COUNTY										
	IICHIGAN	06/30/2017							47,040	XXX
CLINTON BANK M	IICHIGAN	06/30/2017							2,854	
CNB BANK M	IICHIGAN	06/30/2017					247,730	247,998	240,216	XXX
COMMERCEWEST BANK M	IICHIGAN	06/30/2017					248,000	248,000	248,000	XXX
COMMUNITY BANK OF										
OELWEIN M	IICHIGAN	06/30/2017					247,289	213,158	247,982	XXX
COMMUNITY BANK OF THE								, , , , , , , , , , , , , , , , , , ,	•	
BAY M	IICHIGAN	06/30/2017					247,740	213,782	246,833	XXX
1		06/30/2017			I I			242,582	1,423	
CONGRESSIONAL BANK M	IICHIGAN	06/30/2017							244,951	
		06/30/2017						248,000	248,000	
CONSUMERS NATIONAL		2						,	-,	1
BANK M	IICHIGAN	06/30/2017					3.964			XXX
		06/30/2017			I I		38,968	000 000	247,639	
CORNERSTONE								,,,,,,,	•	
	IICHIGAN	06/30/2017					247,625	240,362	314,521	XXX
CORTLAND SAVINGS AND							,	,,,,,,	,	1
	IICHIGAN	06/30/2017					235,958	229,804	247,516	XXX
		06/30/2017			l I		248.000	248,000	248,000	
		06/30/2017			I I		-,	231,067		XXX
		06/30/2017			l I		239,641	245,859	245,598	
CUSTER FEDERAL STATE		J 5, 5 6, E 6 1 1					200,071		2 70,000	
	IICHIGAN	06/30/2017					247,419	233,333	15,752	XXX
		06/30/2017			I I		248.000	248.000	248,000	
		06/30/2017						209,998	247,999	
DEDHAM INSTITUTION FOR		JU/JU/ZU1/					2-11,000	203,330	271,333	^^^
	IICHIGAN	06/30/2017					43,521	248,000	247,899	XXX
		06/30/2017			I I		43,321	226,941	247,699	
		06/30/2017								
DIME SAVINGS BANK OF		00/00/2017					230,430	210,011	241,304	^^^
	IICHIGAN	06/30/2017					2/12 700	238,009	246.841	XXX
			1		I I					
		06/30/2017			l I			240.075	047 701	XXX
		06/30/2017			I I		247,413		247,781	
	IICHIGAN	06/30/2017					247,729	232,766	247,971	XXX
EDGAR COUNTY BANK AND	HOLHOAN	00/00/00/-					000 :==	040 -00		
		06/30/2017	1							XXX
		06/30/2017			l I				247,719	
		06/30/2017			1 1	I	72,050		246,194	
		06/30/2017			I I	I	208,294		-,	
NITEDDDIOE DANIZ	IICHIGAN	06/30/2017	1	1	I l		235,620	l		XXX

	1	Mont	h End L	epository Ba	alances 4	5	Book Balar	nce at End of Ea	ach Month	9
	ı			3	Amount	Amount of		ng Current Qua		9
					of Interest Received	Interest Accrued	6	7	8	
	Depository		Code	Rate of Interest	During Current Quarter	at Current Statement Date	First Month	Second Month	Third Month	*
EQUITY BANK	MICHIGAN	06/30/2017					236,300			XXX
		06/30/2017					242,069		247,690	
EXCHANGE BANK EXCHANGE BANK AND	MICHIGAN	06/30/2017					247,440	214,678	245,634	XXX
TRUST COMPANY	MICHIGAN	06/30/2017					240,370	242,159	247,572	XXX
	MICHIGAN	06/30/2017							3,653	XXX
F & M COMMUNITY BANK NATIONAL ASSOCIATION	MICHIGAN	06/30/2017					130 608	217,612	2/6 182	X X X
FARMERS & MERCHANTS										
BANK	MICHIGAN	06/30/2017					247,998	234,046	245,676	XXX
FARMERS & MERCHANTS BANK OF LONG BEACH	MICHIGAN	06/30/2017					2,966			xxx
FARMERS & MERCHANTS							·			
STATE BANKFARMERS AND	MICHIGAN	06/30/2017					247,979	239,583	247,624	XXX
MERCHANTS STATE BANK.	MICHIGAN	06/30/2017					1,363	12,340		XXX
FARMERS AND							,	,		
MERCHANTS STATE BANK OF	MICHIGAN	06/30/2017					238,999	241,944	247,997	
FARMERS EXCHANGE BANK		06/30/2017					236,999		247,997	
FARMERS TRUST AND								,	•	
		06/30/2017 06/30/2017					495,999 187,746	486,742	495,578	X X X X X Y
FIDELITY BANK	MICHIGAN	06/30/2017					489,393	483,297	495,976	XXX
FINANCIAL FEDERAL BANK	MICHIGAN	06/30/2017					220,623	235,332	247,925	XXX
FIRST AMERICAN INTERNATIONAL BANK	MICHIGAN	06/30/2017					247,301	228,259	247,999	xxx
FIRST BANK	MICHIGAN	06/30/2017					492,169	495,080	495,999	XXX
FIRST BANK & TRUST FIRST BANK FINANCIAL	MICHIGAN	06/30/2017					240,291	241,869		XXX
CENTRE	MICHIGAN	06/30/2017					228,299	217,000	247,284	xxx
	MICHIGAN	06/30/2017					197,991	223,253	247,126	XXX
FIRST CAPITAL BANK OF KENTUCKY	MICHIGAN	06/30/2017					245,206	224,188	245,867	XXX
	MICHIGAN	06/30/2017					247,575		247,901	
FIRST CHOICE BANK	MICHIGAN	06/30/2017					3,661	045 040	040.000	XXX
FIRST CITRUS BANK	MICHIGAN	06/30/2017					243,107	215,813	240,008	
NATIONAL BANK	MICHIGAN	06/30/2017					1,206			XXX
FIRST COMMERCE BANK FIRST COMMUNITY BANK	MICHIGAN	06/30/2017 06/30/2017	II .				242,413	0.40.000	248,000 248,000	
FIRST COMMUNITY BANK	WINDI IIGAN	00/30/2017					248,000	248,000	248,000	^^^
OF BEDFORD COUNTY	MICHIGAN	06/30/2017							247,966	XXX
FIRST COMMUNITY BANK OF WESTERN KENTUCKY	MICHIGAN	06/30/2017					246,628	232,086	247,761	$ _{X \times X} $
FIRST COMMUNITY								·	·	
	MICHIGAN	06/30/2017					248,000		248,000	1
FIRST COUNTY BANK FIRST FEDERAL BANK OF	MICHIGAN	06/30/2017					221,533	217,676	247,905	^^^
LOUISIANA	MICHIGAN	06/30/2017								
FIRST FINANCIAL BANK FIRST FOUNDATION BANK .	MICHIGAN	06/30/2017 06/30/2017							247,755 247,877	
FIRST GUARANTY BANK	MICHIGAN	06/30/2017				l I	248,000		248,000	
FIRST HOPE BANK A							·			
NATIONAL BANKING ASSOCIATIO	MICHIGAN	06/30/2017							247,638	$ _{XXX} $
FIRST INTERNATIONAL									•	
BANK & TRUSTFIRST INTERNET BANK OF	MICHIGAN	06/30/2017					239,347	213,285	1,197	X X X
INDIANA	MICHIGAN	06/30/2017					248,000	248,000	247,996	xxx
FIRST MERCHANTS BANK	MICHICAN							·	•	
NATIONAL ASSOCIATION FIRST MIDWEST BANK OF	MICHIGAN	06/30/2017					244,843	248,000	248,000	
DEXTER	MICHIGAN	06/30/2017					238,199		245,700	xxx
FIRST MIDWEST BANK OF	MICHIGAN	06/30/2017					224,781	218,747	045 070	_{v v v}
	MICHIGAN	06/30/2017						218,747		
FIRST NATIONAL BANK	MICHIGAN	06/30/2017	II .						67,768	
FIRST NATIONAL BANK AND TRUST COMPANY OF VINI	MICHIGAN	06/30/2017					248,000	248,000	248 000	XXX
FIRST NATIONAL BANK								·	•	
CORTEZ	MICHIGAN	06/30/2017					247,999	234,020	247,809	X X X
FIRST NATIONAL BANK IN GREEN FOREST	MICHIGAN	06/30/2017					247,401			XXX
FIRST NATIONAL BANK OF										
AMERICAFIRST NATIONAL BANK OF	MICHIGAN	06/30/2017					247,823	218,555	247,999	XXX
BELLEVUE	MICHIGAN	06/30/2017						236,439	247,982	xxx
FIRST NATIONAL BANK OF								·	•	
CENTRALIAFIRST NATIONAL BANK OF	MICHIGAN	06/30/2017					247,862	220,731	247,870	XXX
FORT SMITH	MICHIGAN	06/30/2017							507	XXX
FIRST NATIONAL BANK OF							040.000	040.000		
LONG ISLAND	MICHIGAN	06/30/2017					248,000	248,000	248,000	XXX

		Monti	n End L	End Depository Balances						
	1		2	3	4 Amount	5 Amount of		nce at End of E ing Current Qua		9
					of Interest Received	Interest Accrued	6	7	8	
					During	at Current				
				Rate of	Current	Statement	First	Second	Third	١.
FIDOT MATIONAL DANK OF	Depository		Code	Interest	Quarter	Date	Month	Month	Month	*
FIRST NATIONAL BANK OF PENNSYLVANIA	MICHIGAN	06/30/2017					248,000	248,000	247,953	xxx
FIRST NATIONAL BANK OF	WIIGHIGAN	00/30/2017					240,000	240,000	247,900	^^^
SYRACUSE		06/30/2017					247,699			
FIRST PARTNERS BANK FIRST RESOURCE BANK		06/30/2017 06/30/2017					247,470		247,777	XXX
FIRST SAVINGS BANK		06/30/2017	1				2,063			XXX
FIRST SAVINGS BANK	MICHIGAN	00/00/0047					237,843		0.45.050	
NORTHWEST FIRST SECURITY BANK AND	MICHIGAN	06/30/2017					237,843	218,869	245,852	X X X
TRUST COMPANY	MICHIGAN	06/30/2017						240,258		XXX
FIRST SENTINEL BANK		06/30/2017 06/30/2017					247,568 943,022		247,604 562,870	
FIRST STATE BANK							•	074,349	502,870	
NEBRASKA	MICHIGAN	06/30/2017					243,425	234,314	247,550	XXX
FIRST STATE BANK OF DEQUEEN	MICHIGAN	06/30/2017					241,563	235,118	247,760	\ \ V V V
FIRST VIRGINIA							•	,	·	^^^
COMMUNITY BANK	MICHIGAN	06/30/2017					247,188			
FIRSTATLANTIC BANK FIRSTCITY BANK OF	MICHIGAN	06/30/2017					234,733	· ·	247,598	X X X
COMMERCE		06/30/2017					179,948		2,480	XXX
FLATIRONS BANKFLINT COMMUNITY BANK		06/30/2017 06/30/2017					27,375 3,075	222,738 19,725		XXX
FLORIDA BUSINESS BANK		06/30/2017					238,443			
FLORIDA CAPITAL BANK							233,444		,	
N.A. FOOTHILLS BANK & TRUST		06/30/2017 06/30/2017					233,444	237,654		
FORTIS PRIVATE BANK	MICHIGAN	06/30/2017					248,000	248,000	248,000	XXX
FRANKLIN SYNERGY BANKFREEDOM BANK		06/30/2017 06/30/2017					247,996	246,039 248,000		
		06/30/2017					248,000 228,854	218,689		
GATEWAY BANK	MICHIGAN	06/30/2017					241,810	232,534		
GATEWAY BANK OF FLORIDA	MICHIGAN	06/30/2017					247,384			XXX
GENESEE REGIONAL BANK	MICHIGAN	06/30/2017					247,999	232,181	248,000	XXX
GENOA BANKING COMPANY	MICHIGAN	06/30/2017							75,820	XXX
COMPANY	MICHIGAN	06/30/2017					2,081	235,745	247,857	XXX
GLENS FALLS NATIONAL										
BANK AND TRUST COMPANY	MICHIGAN	06/30/2017							3.904	XXX
GLOBAL BANK	MICHIGAN	06/30/2017					229,072	228,474	247,415	XXX
GNB BANK		06/30/2017 06/30/2017			1		242,180	229,267	247,854	XXX
GOLDEN PACIFIC BANK							•		·	
NATIONAL ASSOCIATION GORHAM SAVINGS BANK	MICHIGAN	06/30/2017 06/30/2017					235,494 239,631	237,717 247,884	246,016 248,000	
GRAND RIDGE NATIONAL	WIOTHOAN	00/30/2017					,	247,004	240,000	
BANK		06/30/2017						238,106		
GRAND SAVINGS BANK GRANDPOINT BANK		06/30/2017 06/30/2017			1		,	213,563 216,559		XXX
GREAT MIDWEST BANK SSB	MICHIGAN	06/30/2017					224,821	219,010	247,981	XXX
GREAT WESTERN BANK GREATER HUDSON BANK	MICHIGAN	06/30/2017					248,000	248,000	248,000	X X X
NATIONAL ASSOCIATION	MICHIGAN	06/30/2017					234,056	238,905	247,653	XXX
GREEN BANK NATIONAL	MICHIGAN	06/30/2017					246,344	232,394	047.500	\ \ V V V
ASSOCIATIONGUARANTY BANK		06/30/2017					,	232,394	247,503 248,000	
GULFSHORE BANK	MICHIGAN	06/30/2017					247,565	228,553	245,936	XXX
		06/30/2017 06/30/2017					239,280 248,000	235,616 242,109		
HAPPY STATE BANK	MICHIGAN	06/30/2017					248,000	248,000	248,000	XXX
HARDIN COUNTY BANK	MICHIGAN	06/30/2017					240,404	243,811	248,000	XXX
HAWTHORN BANK HEARTLAND BANK		06/30/2017 06/30/2017					248,000 247,990	248,000 234,457	248,000 247,954	
HERITAGE BANK		06/30/2017					11,308		247,304	XXX
HERITAGE BANK OF THE OZARKS	MICHIGAN	06/30/2017							247,896	XXX
HERITAGE BANK USA INC		06/30/2017					247,444	215,984		
HERITAGE COMMUNITY	MICHIGAN	06/30/2017					•		26,082	
		06/30/2017					246,205			X X X X X X
HIGH PLAINS BANK	MICHIGAN	06/30/2017					495,106	421,409	495,247	XXX
HIGHLANDS STATE BANK HINGHAM INSTITUTION	MICHIGAN	06/30/2017					231,275	222,420	247,697	XXX
FOR SAVINGS		06/30/2017								XXX
		06/30/2017					236,964	232,210		
HOME SAVINGS BANK HOME STATE BANK		06/30/2017 06/30/2017					248,000 241,415	248,000 234,125		XXX
HOMETRUST BANK	MICHIGAN	06/30/2017					247,472	215,261	247,989	XXX
IBERIABANKICON BANK OF TEXAS	MICHIGAN	06/30/2017					248,000	248,000	248,000	XXX
	MICHIGAN	06/30/2017					247,829	222,148	55,931	XXX
									· · · · · · · · · · · · · · · · · · ·	•

		Month	ı End D	Depository Ba	alances					
	1		2	3	4	5	Book Bala	ance at End of E	ach Month	9
					Amount	Amount of		ring Current Qua		
			1		of Interest	I –	6	7	8	1
						Interest	О	/	, 0	
					Received	Accrued			i	
					During	at Current			i	
				Doto of	1 - 1	Statement	Firet	Cocond	Third	
				Rate of	Current	l	First	Second	1	
	Depository		Code	Interest	Quarter	Date	Month	Month	Month	*
IDAHO FIRST BANK	MICHIGAN	06/30/2017				l	247,592	227,465	247,878	XXX
		06/30/2017			l	l				1 X X X
		06/30/2017			1		205,482			
		06/30/2017								1 37 37 37
		06/30/2017								
		06/30/2017					150 465	240,000		
	MICHIGAN	06/30/2017					248,000	248,000	248,000	X X X
INVESTORS COMMUNITY									l	
	MICHIGAN	06/30/2017					227,907	228,725	247,597	'
IOWA TRUST & SAVINGS									i	
BANK	MICHIGAN	06/30/2017				[247,608	XXX
IROQUOIS FEDERAL									i	
SAVINGS AND LOAN									i	
ASSOCIATION	MICHIGAN	06/30/2017					226,003	215,088	i	XXX
ISRAEL DISCOUNT BANK		00,00,20					,		1	
OF NEW YORK	MICHIGAN	06/30/2017				.	248 000	248,000	248,000	l x x x
ITASCA BANK & TRUST	MIOTIOAN	00/30/2017					240,000	240,000	1	^ ^ ^
COMPANY	MICHIGAN	06/30/2017					240 249	235,391	244,797	/ v v v
	MICHIGAN	06/30/2017					239,813	234,571	247,616	1^^X
KATAHDIN TRUST	MICHICANI	00/00/0047	1			[004 400	040.047	0.47.000	Jvvv
	MICHIGAN	06/30/2017					231,168	219,917	247,982	X X X
KEYBANK NATIONAL		00/22:	1			[<u>.</u> .			
		06/30/2017							247,998	XXX
		06/30/2017								
	MICHIGAN	06/30/2017					236,372	230,857		
LANDMARK COMMUNITY										
BANK	MICHIGAN	06/30/2017					240.623	231,284	247,777	XXX
LEAD BANK		06/30/2017								
		06/30/2017			1		•	203,567	1,347	
LEGACY BANK & TRUST	IVIIOTIIO/ IIV	00/00/2017				-		200,007	1,047	^ ^ ^
COMPANY	MICHIGAN	06/30/2017					236 802	230,883	247,920	lvvv
		06/30/2017								
		06/30/2017								
		06/30/2017								
	MICHIGAN	06/30/2017					247,564	237,986	247,617	XXX
LINCOLN PARK SAVINGS									i	
BANK (MHC)	MICHIGAN	06/30/2017					234,446	238,325	245,491	XXX
LONE STAR BANK	MICHIGAN	06/30/2017				[247,397	215,206		XXX
LUANA SAVINGS BANK	MICHIGAN	06/30/2017					241.836	228,833		XXX
		06/30/2017								
		06/30/2017								
		06/30/2017								
		06/30/2017							245,692	
		06/30/2017								
		06/30/2017					•	· '		
	MICHIGAN	06/30/2017							3,439	XXX
MERCANTIL									i	
COMMERCEBANK									i	
NATIONAL ASSOCIATION	MICHIGAN	06/30/2017				[248,000	248,000	248,000	XXX
MERCHANTS AND									i	
FARMERS BANK	MICHIGAN	06/30/2017				1			247,438	XXX
MERCHANTS BANK OF									1	1
	MICHIGAN	06/30/2017	l	[248 000	248,000	248,000	XXX
		06/30/2017						248,000		
		06/30/2017						240,000		
		06/30/2017			1	1				
		00/30/2017				[·····]·			∠,499	^^^
METROPOLITAN CAPITAL	MICHIGAN	06/20/0047	1				000 400	040.040	0.47.400	VVV
	IVIIOTIOAN	06/30/2017				[·····]·	∠3∠,438	219,016	241,103	1^^X
METROPOLITAN NATIONAL	MICHICAN	00/00/00 1=	1			1	0.17.000	0.40.000	0.47.04.	
		06/30/2017						248,000		
		06/30/2017								
	MICHIGAN	06/30/2017					247,555	215,992	247,954	XXX
MIDCOAST COMMUNITY			1			1			l	1.
BANK	MICHIGAN	06/30/2017					241,804	234,293	247,589	XXX
MIDWEST COMMUNITY							,		, i	
BANK	MICHIGAN	06/30/2017					231.377	211,026		XXX
MIFFLIN COUNTY SAVINGS									1	1
	MICHIGAN	06/30/2017	1				247 947	187,942		XXX
MORTON COMMUNITY BANK		06/30/2017						4,793		
MUTUAL FEDERAL	WIIOT IIO/ WY	00/00/2017				-		1	270,000	^^^
		İ	1			[i	1
SAVINGS BANK OF	MICHICAN	06/20/0047	1			1	047 545	040.000	040.000	Jvvv
		06/30/2017								
1	MICHIGAN	06/30/2017					240,589	242,794		XXX
NEBRASKALAND NATIONAL			1			[l	1.
	MICHIGAN	06/30/2017					1,236	2,103		XXX
NEW HORIZON BANK										
	MICHIGAN	06/30/2017					229.232	217,306	245,572	XXX
		06/30/2017							247,680	
		06/30/2017							245,568	
NEWBURYPORT FIVE		, U U/LU I I					•			
	MICHIGAN	06/30/2017	1				1 396		i	XXX
		06/30/2017							247,988	
							247,000	214,356		
INION DANIE	MICHICAN						//L/ 75X	/1// (56)		x Y
		06/30/2017 06/30/2017								

		Monti	n End D	Depository Ba	alances					
	1		2	3	4 Amount	5 Amount of	Book Balance at End of Each Month During Current Quarter			
					of Interest Received	Interest Accrued	6	7	8	
					During	at Current				
				Rate of	Current	Statement	First	Second	Third	
	Depository		Code	Interest	Quarter	Date	Month	Month	Month	*
NORTH SHORE										
COMMUNITY BANK & TRUST NORTHERN BANK & TRUST		06/30/2017						41		XXX
COMPANY		06/30/2017					242,058	231,053	248,000	
NORTHPOINTE BANK		06/30/2017 06/30/2017					240,003 53,968			
NXT BANK		06/30/2017					235,245			
		06/30/2017						2,046		XXX
OCULINA BANK	MICHIGAN	06/30/2017					229,974	212,825	247,690	XXX
OHIO VALLEY BANK		00/00/00/7							0.47.047	,,,,,
OJAI COMMUNITY BANK		06/30/2017 06/30/2017					234,496	228,743	247,617 247,523	
OLD MISSOURI BANK		06/30/2017					234,490			
ONEUNITED BANK	MICHIGAN	06/30/2017					228,749	230,369		
OPEN BANK	MICHIGAN	06/30/2017					248,000	248,000	248,000	
OPTIMA BANK & TRUST	ANGUNGAN	00/00/0047					040.000	0.40,000	0.47.005	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
OREGON COMMUNITY	MICHIGAN	06/30/2017				[248,000	248,000	247,865	X X X
BANK & TRUST	MICHIGAN	06/30/2017					235,194	230,884	247,811	XXX
ORITANI BANK		06/30/2017					240,123		247,011	XXX
PACIFIC COAST BANKERS										
BANK		06/30/2017 06/30/2017					247,548			
PACIFIC COMMERCE BANK PACIFIC ENTERPRISE BANK		06/30/2017					247,585	230,432 248,000	247,796 248,000	
PACIFIC MERCANTILE BANK		06/30/2017					248,000	248,000		
PADUCAH BANK AND	MIOLIIOAN	00/00/00/-					044.0=0	000 101	0.47.040	, , ,
TRUST COMPANY PAN AMERICAN BANK		06/30/2017 06/30/2017					244,053	239,434 235,293		
PARKSIDE FINANCIAL BANK	IVIIOI IIOAIV	00/30/2017						∠აა,∠ყა	247,822	^^^
& TRUST	MICHIGAN	06/30/2017					191,369	218,483		
PATRIOT BANK		06/30/2017					248,000	248,000		
PEOPLES BANK	MICHIGAN	06/30/2017					522,681	493,515	603,392	XXX
COMMERCE	MICHIGAN	06/30/2017					247,683	212,651	246,585	XXX
PEOPLES COMMUNITY										
BANK	MICHIGAN	06/30/2017					230,226	234,217	247,484	XXX
PEOPLES FIRST SAVINGS	MICHIGAN	06/30/2017					241,258	233,828	247,601	V V V
BANK PEOPLES NATIONAL BANK .		06/30/2017					8.774			XXX
PEOPLES SAVINGS BANK	MICHIGAN	06/30/2017				I I	240,854	227,577	241,683	
PEOPLES UNITED BANK		06/30/2017					234,257	224,437	247,979	
PIEDMONT BANK		06/30/2017 06/30/2017					241,456	248,000 237,669	248,000 248,000	
PILOT BANK		06/30/2017					178,603	240,272	10,037	XXX
PIONEER BANK SSB		06/30/2017					239,584	246,315		
PLATTE VALLEY BANK		06/30/2017					161,882	140,556		XXX
PLAZA BANK POST OAK BANK N.A		06/30/2017 06/30/2017					193,107	234,138 248,000	250,976 247,866	
PRAIRIE STATE BANK AND	WIGHIGAN	00/30/2017					240,000	240,000	247,000	XXX
TRUST		06/30/2017						973	247,898	XXX
PREMIER BANK		06/30/2017	1			I I	189,219	449,944		
PRIME ALLIANCE BANK		06/30/2017 06/30/2017				I I	247,701 228,190	243,688 215,227	247,852 78,295	
PRIVATEBANK AND TRUST		00/00/2017							10,293	^^^
COMPANY	MICHIGAN	06/30/2017				[184,483	208,119	248,000	XXX
PROGRESS BANK AND	MICHICAN	06/30/2017					040 740	005.050	0.47 400	VVV
PROVIDENT BANK		06/30/2017						235,959 246,030		XXX
PROVIDENT STATE BANK								,		
INC		06/30/2017			l			248,000		XXX
QUONTIC BANK	MICHIGAN	06/30/2017					247,281	246,996	247,610	XXX
RBS CITIZENS NATIONAL ASSOCIATION	MICHIGAN	06/30/2017		L	l		231,578	202,199	246,828	XXX
READING CO-OPERATIVE								·	,	
BANK		06/30/2017			1		247,256	233,782		
REGENT BANK	MICHIGAN	06/30/2017					248,000	248,000	247,744	XXX
NATIONAL ASSOCIATION	MICHIGAN	06/30/2017		L	l		247,804	224,428	246,435	XXX
RENASANT BANK	MICHIGAN	06/30/2017					237,392	242,334		XXX
REPUBLIC BANK & TRUST	MICHIGAN	06/30/2017								XXX
REPUBLIC BANK OF CHICAGO	MICHIGAN	06/30/2017					245,287	214,266	247,216	X Y Y
RESURGENS BANK		06/30/2017					245,267		247,216	
RICHWOOD BANKING							•		,	
COMPANY		06/30/2017						243,557	247,886	
RIVER BANK & TRUST		06/30/2017 06/30/2017					1,330	234,097	243,658	XXX
		06/30/2017					247,000	234,097		
RIVERSIDE BANK	MICHIGAN	06/30/2017					107,420			XXX
RIVERVIEW BANK		06/30/2017					247,993	244,858		
RIVERWIND BANK		06/30/2017 06/30/2017					233,163	229,386 229,909		XXX
ROCKFORD BANK AND								·	241,200	^^^
	MICHIGAN	06/30/2017		<u> </u>	<u> </u>	<u> </u>	66,994	232,601	247,772	XXX

		Wonti	n Ena L	Depository Ba	aiances					
	1		2	3	4	5	Book Bala	nce at End of E	ach Month	9
					Amount	Amount of		ing Current Qua		
						1 +				-
					of Interest	Interest	6	7	8	
					Received	Accrued				
					During	at Current				
				Rate of	Current	Statement	First	Second	Third	
									1	
	Depository		Code	Interest	Quarter	Date	Month	Month	Month	*
ROCKLAND TRUST										
COMPANY	MICHIGAN	06/30/2017					239,036	245,868	70,767	XXX
ROCKVILLE BANK		06/30/2017					248,000	232,097	246,161	
ROYAL SAVINGS BANK		06/30/2017					248,000			XXX
		06/30/2017					239,521	242.103		
SANTANDER BANK, N.A	MICHIGAN	06/30/2017					247,935	230,879		
SARATOGA NATIONAL	WILCH TIGAN	00/30/2017					241,933	230,079	247,303	^^^
BANK AND TRUST	MICHIGAN	06/30/2017							2 202	VVV
COMPANY	MICHIGAN	06/30/2017					• • • • • • • • • • • • • • • • • • • •		2,303	^ ^ ^
SAUK VALLEY BANK &	MICHIGAN	00/00/0047					242,911	004.747		VVV
TRUST COMPANY		06/30/2017								XXX
		06/30/2017						233,122		
SAVOY BANK	MICHIGAN	06/30/2017					248,000	248,000	247,488	XXX
SEASIDE NATIONAL BANK &		00/00/00/-					0.40.000	0.40.000		
TRUST	MICHIGAN	06/30/2017					248,000			
SECURITY BANK	MICHIGAN	06/30/2017					247,999	234,989	247,970	XXX
SECURITY BANK AND	Auguno Aug	00/00/00					222	00=		
TRUST COMPANY		06/30/2017					226,800	227,984		
		06/30/2017					618,480			
SERVISFIRST BANK		06/30/2017					247,955	236,852	· ·	
SHERWOOD STATE BANK		06/30/2017					1,733			XXX
		06/30/2017					244,618			
SMARTBANK		06/30/2017					247,704			
SOLERA NATIONAL BANK		06/30/2017					169,953		247,812	
SONABANK	MICHIGAN	06/30/2017					103,234			XXX
SOUTH COUNTY BANK										
NATIONAL ASSOCIATION	MICHIGAN	06/30/2017					230,823	226,720	241,627	XXX
SOUTH STORY BANK &										
TRUST	MICHIGAN	06/30/2017					26,658			
SOUTHEAST BANK	MICHIGAN	06/30/2017					248,000	232,243		
SOUTHERN BANK	MICHIGAN	06/30/2017					239,414	234,553	247,820	XXX
SOUTHERN COMMUNITY										
BANK		06/30/2017						242,475		
SOUTHERN STATES BANK .		06/30/2017					248,000	248,000	248,000	XXX
SOUTHSIDE BANK		06/30/2017							238,505	
SOUTHWEST BANK	MICHIGAN	06/30/2017					248,000	248,000	248,000	XXX
SPENCER SAVINGS BANK	MICHIGAN	06/30/2017					236,096	235,089	248,000	XXX
SPRING BANK	MICHIGAN	06/30/2017					231,266	129,866	247,990	XXX
ST. HENRY BANK	MICHIGAN	06/30/2017					234,078	229,258	245,659	XXX
ST. MARTIN BANK AND									,	
TRUST COMPANY	MICHIGAN	06/30/2017					1,679			XXX
STANDING STONE										
NATIONAL BANK	MICHIGAN	06/30/2017					232,406	237,764	247,953	XXX
START COMMUNITY BANK	MICHIGAN	06/30/2017					234,282			
STATE BANK AND TRUST									'	
COMPANY	MICHIGAN	06/30/2017				lI	239,761	224,995	247,999	XXX
STATE GUARANTY BANK	MICHIGAN	06/30/2017					183,886		440, 704	
STERLING BANK	MICHIGAN	06/30/2017					227,965		247,700	
STERLING NATIONAL BANK	MICHIGAN	06/30/2017					247,999			
STILLWATER NATIONAL							,		., .	
BANK AND TRUST										
	MICHIGAN	06/30/2017					242.277	231,774	247.828	XXX
		06/30/2017							248,000	
SUCCESS BANK	MICHIGAN	06/30/2017					231.433	228,356		
SUFFOLK COUNTY	[- ,		,	1
NATIONAL BANK OF										
	MICHIGAN	06/30/2017							238,770	XXX
SUMMIT BANK & TRUST		06/30/2017						242,327		XXX
SUNTRUST BANK		06/30/2017					248,000			
		06/30/2017					247,999			
TD BANK N.A.		06/30/2017					247,996			
TENSAS STATE BANK		06/30/2017					213,728			
TEXANA BANK NATIONAL										
ASSOCIATION	MICHIGAN	06/30/2017				[230,784	223 853	247,673	XXX
TEXAS CAPITAL BANK									2 17 ,070	
NATIONAL ASSOCIATION	MICHIGAN	06/30/2017	l		l		247,115	240,652	248,000	XXX
TEXAS CITIZENS BANK		20,0012011						2 10,002	10,000	````
NATIONAL ASSOCIATION	MICHIGAN	06/30/2017					247,998	233,871	247,418	XXX
TEXAS HERITAGE		30,00,2017					•		,	^^^
NATIONAL BANK	MICHIGAN	06/30/2017					1 052			XXX
THE COMMERCE BANK		06/30/2017				[·····]	247,309	224,677		
THIRD COAST BANK SSB		06/30/2017						248,000		
TITAN BANK N.A.		06/30/2017					240,000		22,684	
TODAYS BANK		06/30/2017								
								239,504		
TOTALBANK	INITORIGAN	06/30/2017							247,716	^ X X
TOUCHMARK NATIONAL	MICHICAN	06/20/0047					007 700	243,770	0.47.000	VVV
BANK		06/30/2017								
TOWN AND COUNTRY BANK		06/30/2017				[·····			1,574	XXX
TOWN NORTH BANK N.A		06/30/2017					000 700	020 544	247,820	XXX
TRADITION CAPITAL BANK		06/30/2017				[·····	239,728	232,541	248,000	
TRADITIONAL BANK INC		06/30/2017					240,6/8	223,596	247,066	1
TRANSPECOS BANKS		06/30/2017						229,849		1
TREYNOR STATE BANK		06/30/2017					247,998		, , , , , ,	
TRISTATE CAPITAL BANK	MICHIGAN	06/30/2017					7,509			XXX
										

Month End Depository Balances 1 2 3 4 5 Book Balance at End of Each Month 9											
1			2	3	4 Amount	5 Amount of	Book Balance at End of Each Month During Current Quarter				
										1	
					of Interest	Interest	6	7	8		
					Received	Accrued					
					During	at Current					
				Data of			C:4	Casand	Th:l		
				Rate of	Current	Statement	First	Second	Third		
	Depository		Code	Interest	Quarter	Date	Month	Month	Month	*	
TRUSTMARK NATIONAL											
BANK	MICHIGAN	06/30/2017						248,000	248,000	XXX	
	MICHIGAN	06/30/2017					228,620	227,323			
UMPQUA BANK		06/30/2017					247,030	242,706			
UNITED BANK		06/30/2017					247,999	238,546			
UNITED BANK & TRUST	WIIOT IIO/ UV	00/00/2017					247,000	200,040		^^^	
NATIONAL ASSOCIATION	MICHIGAN	06/30/2017							2,139	XXX	
UNITED BANK INC.		06/30/2017					244,930	235,188			
UNITED COMMUNITY BANK		06/30/2017					240,296	232,596			
UNIVEST BANK AND TRUST	WINDLINGTON	00/00/2017					240,230	202,030	241,004	^^^	
CO	MICHIGAN	06/30/2017					236,782	224,396	245,888	y v v	
URBAN TRUST BANK		06/30/2017					230,762			^ ^ ^ \	
		06/30/2017						248,000			
							248,000 240,982	248,000	248,000 247,719	V V V	
USNY BANK BANK	MICHIGAN	06/30/2017							405 520	1000	
							248,000	248,000			
VALLIANCE BANK		06/30/2017					236,089	244,767	247,997	XXX	
VERITEX COMMUNITY BANK VERUS BANK OF		06/30/2017					238,962	218,617	,		
		06/30/2017							247,968		
VICTORY BANK	MICHIGAN	06/30/2017							191,893	XXX	
VIRGINIA COMMONWEALTH											
BANK		06/30/2017							245,891	XXX	
VISTA BANK	MICHIGAN	06/30/2017						1,106		XXX	
WASHINGTON BUSINESS											
BANK	MICHIGAN	06/30/2017							2,234	XXX	
WASHINGTON TRUST									,		
COMPANY OF WESTERLY	MICHIGAN	06/30/2017					248,000	248,000	248,000	XXX	
WASHINGTONFIRST BANK		06/30/2017						248,000			
WATCH HILL BANK		06/30/2017						232,732			
WESTBURY BANK	MICHIGAN	06/30/2017					229,351	231,832		XXX	
WESTERN ALLIANCE BANK		06/30/2017								XXX	
WESTERN STATES BANK		06/30/2017	1								
WESTFIELD BANK FSB		06/30/2017							2,400	XXX	
WESTSIDE STATE BANK WOLVERINE BANK		06/30/2017									
FEDERAL SAVINGS BANK	MICHIGAN	06/30/2017					247,732	247,743	248,000	Y Y Y	
WOORI AMERICA BANK								247,743			
							241,411	243,234	241,010	^ ^ ^	
	depositories that do not exceed										
allowable limit in any one depository (see Instructions) - open depositories .		XXX	X X X						XXX		
0199999 Totals - Open Depositories		XXX	X X X			. 168,970,017	. 171,228,425	. 153,692,128	XXX		
	depositories that do not exceed										
allowable limit in any one depos	sitory (see Instructions) - suspen	ided									
depositories			XXX	X X X				<u>.</u>	<u></u>	XXX	
0299999 Totals - Suspended Depositories			XXX	X X X						XXX	
0399999 Total Cash On Deposit		XXX	X X X			. 168,970,017	. 171,228,425	. 153,692,128			
0499999 Cash in Company's Office		XXX	X X X	. X X X .	X X X	. 100,010,011	,, ,	. 100,002,120	XXX		
0599999 Total Cash			XXX	X X X		٨٨٨	. 168,970,017	. 171,228,425	. 153,692,128		
U599999 Total Cash			$\wedge \wedge \wedge$	A A A			. 100,570,017	. 111,420,420	1. 100.052.120	$I \wedge A \wedge A$	

SCHEDULE E - PART 2 - CASH EQUIVALENTS Show Investments Owned End of Current Quarter

Show Investments Owned End of Current Quarter											
1	2	3	4	5	6	7	8				
						Amount of					
		Date	Rate of	Maturity	Book/Adjusted	Interest	Amount Received				
Description	Code	Acquired	Interest	Date	Carrying Value	Due & Accrued	During Year				
8699999 Total - Cash Equivalents					1		1				

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